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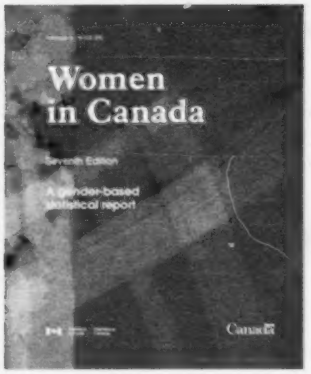
Women in Canada: A Gender-based Statistical Report

Senior Women



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p preliminary
r revised
x suppressed to meet the confidentiality requirements of the *Statistics Act*
E use with caution
F too unreliable to be published
* significantly different from reference category ($p < 0.05$)

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Senior Women

Introduction

The population in Canada, as in many industrialized countries, is aging, and this will accelerate in the coming years. An aging population has implications for many wide-ranging areas such as health, care giving and receiving, housing, transit and financial circumstances. Although the population of both women and men is aging, women are overrepresented among the senior population aged 65 and over compared with men.

This chapter of *Women in Canada* examines many aspects related to senior women in Canada, including their socio-demographic characteristics, life expectancy, living arrangements, social participation, Internet use, health, assistance with daily living and leading causes of death, as well as economic characteristics such as their labour force participation and income. The focus will be on recent patterns, with discussion of historical trends where appropriate, including selected analysis by ethnocultural diversity, Aboriginal identity and geographic region.[1]

Data are from a wide variety of sources, including the 2011 Census of Population, the 2011 National Household Survey, vital statistics, population estimates and projections, as well as a number of other surveys including the Canadian Survey on Disability, the General Social Surveys on Social Identity, on Giving, Volunteering and Participating, and on Caregiving and Care Receiving, the Labour Force Survey, and the Canadian Community Health Survey.[2]

Population aging is gaining momentum

The population of both females and males in Canada continues to age. On July 1, 2015, 3.2 million of Canada's 5.8 million seniors aged 65 and over were women (Table 1), accounting for 54.7% of this age group and 17.5% of the female population.

According to the medium-growth (M1) scenario of the most recent population projections, population aging in Canada would gain momentum during the next 15 years.[3,4] This period reflects the movement of the large cohort of baby boomers born between 1946 and 1965—aged 50 to 69 in 2015—into their senior years. The first wave of the baby-boom cohort reached age 65 in 2011. By 2031, projections show there would be 5.1 million senior women, representing 53.0% of the population aged 65 years and over and 24.2% of the total female population. By 2061, 6.7 million of the 12.8 million seniors would be women, accounting for 52.4% of the senior population and 26.6% of the total female population.

Beyond the movement of the baby-boom cohort through the age structure, there are several other reasons for population aging in Canada. Since 1972, Canada has had sustained below replacement level fertility,[5] which from a demographic perspective, means that not enough babies are entering the age structure to replace their parents, leaving the population to grow older. In addition, overall lower mortality rates throughout the life course over the past century has resulted in higher life expectancy for both females and males, meaning that more people are not only surviving to age 65, but are spending many years as a senior.

1. More detail on immigrant women, visible minority women and Aboriginal women are available in other chapters of *Women in Canada*.
2. In this chapter, data from population estimates, population projections and vital statistics cover the total population. The proportions of seniors in private households living in couples, alone or with others, based on census data, are presented as a share of the combined senior population in private households and collective dwellings. Data from the following sources are based exclusively on the population in private households: National Household Survey (NHS), General Social Survey (GSS), Canadian Community Health Survey (CCHS), Canadian Survey on Disability (CSD), and Labour Force Survey (LFS).
3. Bohnert, N., J. Chagnon and P. Dion. 2014. *Population Projections for Canada (2013 to 2063), Provinces and Territories (2013 to 2038)*. Statistics Canada Catalogue no. 91-520-X.
4. Unless otherwise specified, population projections in this chapter are based on the medium-growth projection scenario (M1), although population aging occurs in all projection scenarios. Individuals are invited to consult other projection scenarios.
5. Specifically, replacement level fertility refers to the number of children per woman necessary for the population to replace itself, taking into account mortality between birth and age 15, and in the absence of migration. Replacement fertility is currently based on a total fertility rate of 2.1, and in 2011, the total fertility rate was 1.61.

Table 1
Population aged 65 and over, by sex, Canada, 1921 to 2061

Year	Women		Men	Both sexes
	thousands	as a percentage of the total population	thousands	thousands
Observations				
1921	204.9	48.8	215.1	420.0
1931	281.4	48.8	294.7	576.1
1941	376.9	49.1	391.1	768.0
1951	534.9	49.2	551.4	1,086.3
1956	621.6	50.0	622.3	1,243.9
1961	717.0	51.5	674.1	1,391.2
1966	823.0	53.5	716.6	1,539.5
1971	972.1	55.2	790.3	1,762.4
1976	1,135.5	56.1	887.1	2,022.6
1981	1,360.0	57.2	1,017.0	2,377.0
1986	1,589.1	58.1	1,147.5	2,736.6
1991	1,864.4	58.0	1,348.0	3,212.5
1996	2,065.2	57.7	1,513.8	3,579.0
2001	2,229.8	57.0	1,682.4	3,912.3
2006	2,430.2	56.4	1,879.7	4,310.0
2011	2,748.9	55.5	2,201.4	4,950.3
2015	3,161.4	54.7	2,619.5	5,780.9
Projections				
2021	3,820.8	53.8	3,276.6	7,097.4
2026	4,469.3	53.3	3,911.1	8,380.4
2031	5,057.5	53.0	4,481.6	9,539.1
2036	5,427.3	53.0	4,822.1	10,249.4
2041	5,686.0	53.0	5,051.8	10,737.8
2046	5,929.7	52.9	5,276.5	11,206.1
2051	6,178.2	52.8	5,514.9	11,693.1
2056	6,433.2	52.7	5,773.9	12,207.0
2061	6,722.4	52.4	6,096.4	12,818.7

Notes: Estimates adjusted for net census undercoverage. 2015 data are preliminary estimates. Newfoundland and Labrador excluded in 1921, 1931 and 1941. Projections are based on the medium-growth scenario (M1). Other scenarios are available.
Sources: Statistics Canada, Population Estimates Program, 1921 to 1966, CANSIM table 051-0001, 1971 to 2015 and Demography Division, Custom Tabulation, 2021 to 2061.

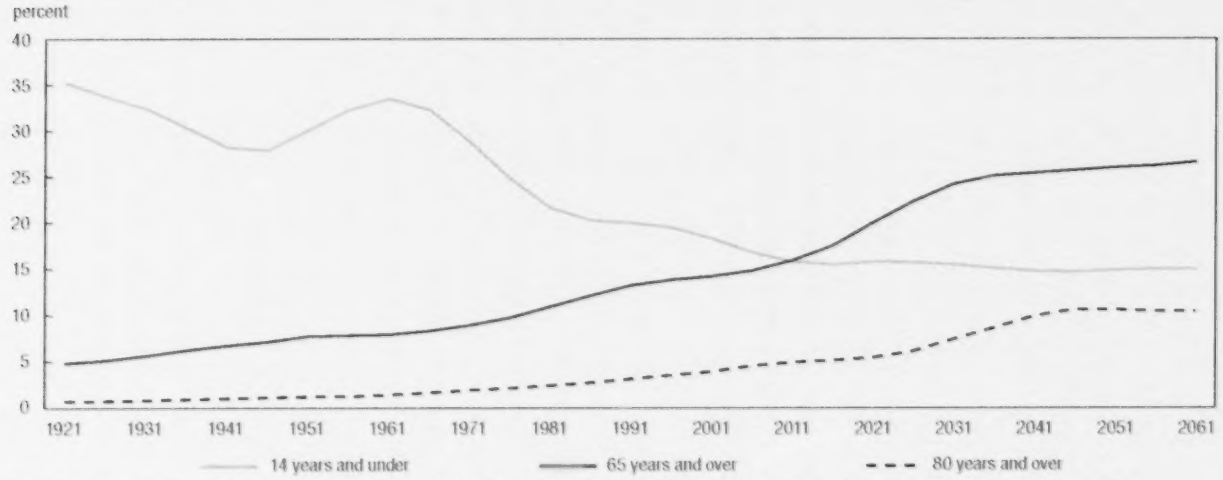
On July 1, 2015, there were more senior women aged 65 and over (17.5%) than girls aged 14 and under (15.5%), a shift which first occurred in 2011 (Chart 1).[6,7] More than four decades earlier, in 1971, senior women comprised 8.9% of the female population while girls aged 14 and under accounted for more than triple this share, at 28.8%. According to the medium-growth scenario of the most recent population projections, the gap between these two age groups would continue to widen in the coming decades. By 2061, more than one-quarter (26.6%) of the female population would be seniors and the proportion of girls would remain relatively stable at 15.0%. For males, the share of boys continues to exceed that of senior men. Specifically, on July 1, 2015, 14.7% of the male population were seniors and 16.6% were boys aged 14 and under.

On July 1, 2015, of the 1.5 million people aged 80 and over in Canada, that is, the "oldest old", nearly 922,000 were women, accounting for 5.1% of the total female population and 29.2% of senior women. Among the total male population, 3.3% were aged 80 and over on July 1, 2015.

Not only is the proportion of senior women overall projected to increase, but so is the share of women aged 80 and over. The medium-growth scenario of the most recent population projections indicates there would be 1.5 million women aged 80 and over by 2031, and 2.6 million women in this age group by 2061. In fact, the share of females aged 80 and over is projected to become closer to that of girls aged 14 and under in the coming decades. As a share of senior women, those aged 80 and over would peak at 41.4% in 2046, before starting to decline slightly as the large cohort of baby boomers exits the age structure and is replaced by smaller cohorts.

6. For both sexes, this shift first occurred in 2015. For more information, see A. Lebel and P. Charbonneau, 2016. *Annual Demographic Estimates 2015: Canada, Provinces and Territories*. Statistics Canada Catalogue no. 91-215-X.
7. At the provincial/territorial level, on July 1, 2015, the proportion of senior women exceeded that of girls aged 14 and under in all provinces east of and including Ontario, as well as in British Columbia. The difference was largest in Nova Scotia, where 20.3% of the female population were seniors and 13.3% were girls. In the remaining provinces and territories, the proportion of girls aged 14 and under was higher than that of senior women, and the difference was largest in Nunavut, where 31.5% of the female population were girls and 3.7% were seniors.

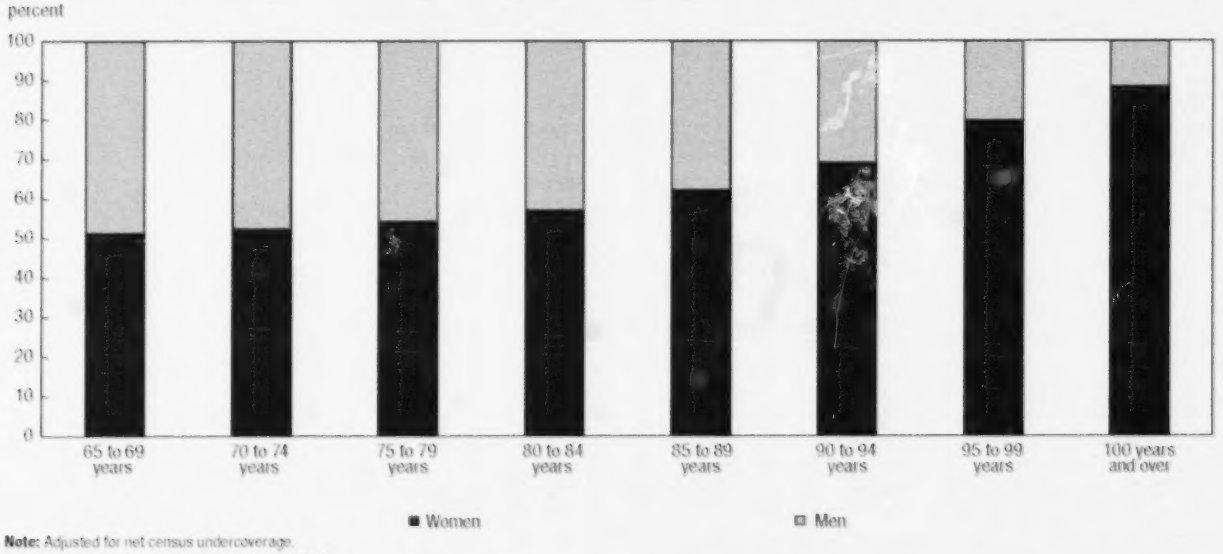
Chart 1
Girls aged 14 and under, women aged 65 and over and women aged 80 and over as a percentage of the female population, Canada, 1921 to 2061



Notes: Estimates adjusted for net census undercoverage. Newfoundland and Labrador excluded from 1921 to 1946. Projections are based on the medium-growth scenario (M1). Other scenarios are available.
Sources: Statistics Canada, Population Estimates Program, 1921 to 1966, CANSIM table 051-0001, 1971 to 2015 and Demography Division, Custom Tabulation, 2021 to 2061.

Differences in mortality and life expectancy between women and men become increasingly apparent across the senior years. At ages 65 to 74, women slightly outnumbered men on July 1, 2015, with the gap widening at ages 75 and over (Chart 2). More than 6 in 10 (62.2%) seniors aged 85 to 89 were women on July 1, 2015, as were nearly 9 in 10 (88.4%) centenarians, that is, people aged 100 and over.

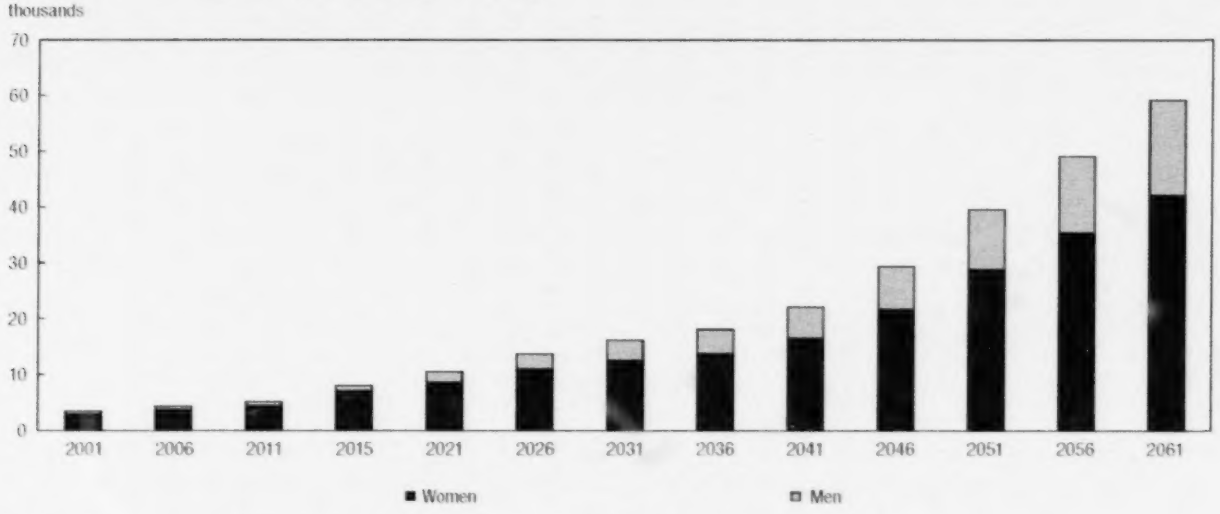
Chart 2
Distribution of population aged 65 and over, by age group and sex, Canada, July 1, 2015



Note: Adjusted for net census undercoverage.
Source: Statistics Canada, CANSIM table 051-0001.

Greater longevity is evident in the increasing number of centenarians. On July 1, 2015, it was estimated that there were close to 8,100 centenarians in Canada, of whom 7,100 were women (Chart 3). In comparison, there were about 3,500 centenarians in 2001, and close to 3,000 of them were women. By 2031, there could be 12,600 female centenarians, according to the medium-growth scenario of the most recent population projections, representing 77.8% of the 16,200 centenarians. By 2061, there could be 42,200 female centenarians (of 59,200), representing 71.3% of this population. Female centenarians could maintain their proportional advantage relative to males in the coming decades, owing to the lower mortality rates of females across most of the life course compared with males. However, because gains in life expectancy have been more rapid for men than for women in recent decades, the sex differential among the oldest seniors is narrowing.

Chart 3
Number of centenarians, by sex, Canada, 2001 to 2061



Notes: Estimates adjusted for net census undercoverage. Projections are based on the medium-growth scenario (M1). Other scenarios are available.
Sources: Statistics Canada, CANSIM table 051-0001, 2001 to 2015 and CANSIM table 052-0005, 2021 to 2061.

Population growth most rapid for the oldest women

From July 1, 2014 to June 30, 2015, there was relatively rapid growth of the population in particular age groups corresponding to the baby boomers, but growth occurred at an even faster pace for women and men aged 90 and over (Table 2). In fact, seniors in their late nineties were the fastest-growing age group during the 2014/2015 period, at a pace of 9.8% for women and 14.1% for men.

While growth was similar for females and males of all age groups below age 70, it was slightly more rapid for men than women among 70- to-late-90-year-olds. The second most rapidly growing age group of females were centenarians. In contrast, there was negative growth for males aged 100 and over between July 1, 2014 and June 30, 2015. Given that the population of male centenarians is much smaller than that of females, it is subject to more fluctuation.

Population growth in 2014/2015 was also relatively rapid for both women and men aged 60 to 74. For example, the number of women and men aged 65 to 69 each grew at a pace of 4.3% in the year prior to July 1, 2015.

Table 2
Percent growth of the population, by age group and sex, Canada, July 1, 2014 to June 30, 2015

Age group	Females	Males
	percent	
0 to 4 years	0.4	0.4
5 to 9 years	1.8	1.7
10 to 14 years	0.0	-0.2
15 to 19 years	-1.9	-1.8
20 to 24 years	-0.6	0.0
25 to 29 years	1.2	1.2
30 to 34 years	1.0	0.8
35 to 39 years	1.5	1.4
40 to 44 years	-0.2	-0.5
45 to 49 years	-2.2	-2.5
50 to 54 years	-0.4	-0.4
55 to 59 years	1.8	1.8
60 to 64 years	3.1	3.0
65 to 69 years	4.3	4.3
70 to 74 years	4.0	4.7
75 to 79 years	2.6	2.8
80 to 84 years	0.4	1.5
85 to 89 years	1.7	4.7
90 to 94 years	3.6	6.4
95 to 99 years	9.8	14.1
100 years and over	7.1	-1.0

Note: Adjusted for net census undercoverage.
Source: Statistics Canada, CANSIM table 051-0001.

Proportions of senior women vary across the country

The share of the female population comprised of seniors aged 65 and over varies across the country from the national share (17.5%), reflecting different historical patterns of fertility and migration (Table 3). On July 1, 2015, the provinces with the highest proportions of senior women were found in eastern Canada, where this group made up about one-fifth of the female populations of New Brunswick (20.4%), Nova Scotia (20.3%), Prince Edward Island (19.7%), Newfoundland and Labrador (19.5%) and Quebec (19.3%). These provinces have experienced among the lowest fertility rates in the country in recent decades and generally higher levels of out-migration than in-migration, especially of young adults. In contrast, the share of senior women in the female population was below the national average in the Prairie provinces, particularly Alberta (12.8%), and in the territories: Yukon (10.6%), Northwest Territories (7.1%) and Nunavut (3.7%), regions all characterized by younger populations. Similarly, the Atlantic provinces had higher proportions of senior men (17% to 18%) than did Canada overall (14.7%) while the lowest proportions of men aged 65 and over were found in Alberta (10.5%), the Northwest Territories (6.6%) and Nunavut (3.7%).

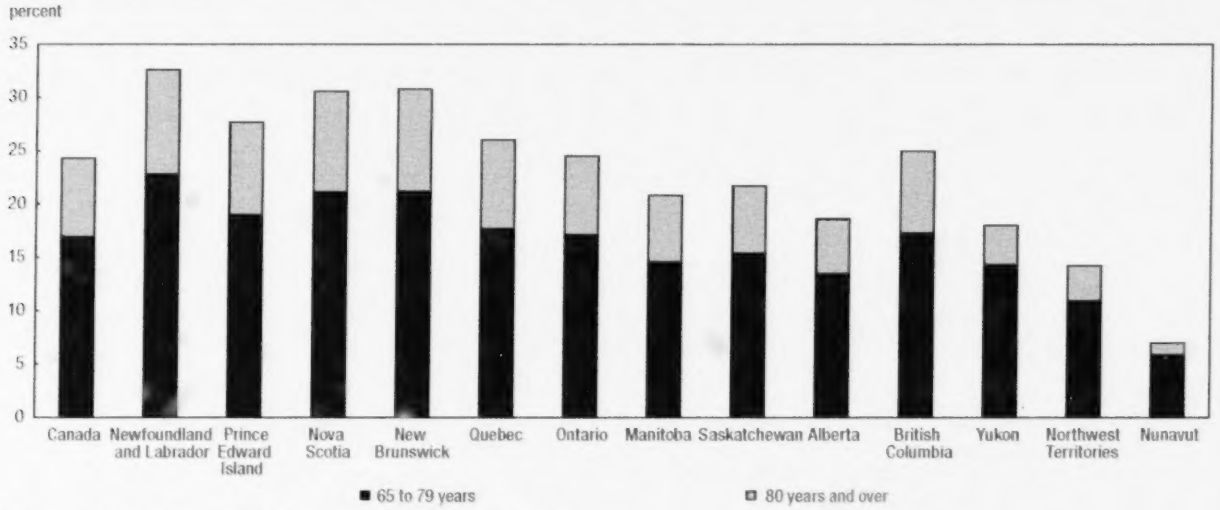
Table 3
Population aged 65 and over, by sex, Canada, provinces and territories, July 1, 2015

Region	Women				Men		
	thousands	percent	as a percentage of the total female region population	as a percentage of the population aged 65 and over	thousands	percentage	as a percentage of the total male region population
Newfoundland and Labrador	52.1	1.6	19.5	53.6	45.2	1.7	17.4
Prince Edward Island	14.8	0.5	19.7	54.5	12.4	0.5	17.4
Nova Scotia	97.6	3.1	20.3	54.8	80.5	3.1	17.4
New Brunswick	77.7	2.5	20.4	54.3	65.5	2.5	17.6
Quebec	800.9	25.3	19.3	55.1	651.6	24.9	15.9
Ontario	1,219.6	38.6	17.4	55.2	991.6	37.9	14.6
Manitoba	105.8	3.3	16.3	55.1	86.1	3.3	13.4
Saskatchewan	90.9	2.9	16.2	54.8	75.0	2.9	13.1
Alberta	263.5	8.3	12.8	54.1	223.6	8.5	10.5
British Columbia	434.4	13.7	18.4	53.1	383.7	14.6	16.5
Yukon	2.0	0.1	10.6	47.8	2.1	0.1	11.2
Northwest Territories	1.5	0.0	7.1	50.9	1.5	0.1	6.6
Nunavut	0.7	0.0	3.7	48.8	0.7	0.0	3.7
Canada	**3,161.4**	**100.0**	**17.5**	**54.7**	**2,619.5**	**100.0**	**14.7**

Note: Adjusted for net census undercoverage.
Source: Statistics Canada, CANSIM table 051-0001.

Based on the medium-growth scenario of the most recent population projections, these trends would continue, with higher proportions of seniors, including the oldest old, projected in eastern Canada and lower proportions, in the western provinces and territories. Specifically, more than 3 in 10 females could be seniors in some provinces in 2031 (Chart 4), namely Newfoundland and Labrador (32.6%), New Brunswick (30.7%) and Nova Scotia (30.6%). In comparison, in the Prairie provinces, the shares would be about 2 in 10: Saskatchewan (21.7%), Manitoba (20.9%) and Alberta (18.6%). The proportion of seniors in the female population in 2031 would remain lowest in the territories: Yukon (18.0%), Northwest Territories (14.2%) and Nunavut (7.0%). However, even these younger regions would still experience population aging.

Chart 4
Proportion of the female population composed of seniors aged 65 and over, by broad age group, Canada, provinces and territories, 2031



Note: Projections are based on the medium-growth scenario (M1). Other scenarios are available.
Source: Statistics Canada, Demography Division, Custom Tabulation, 2031.

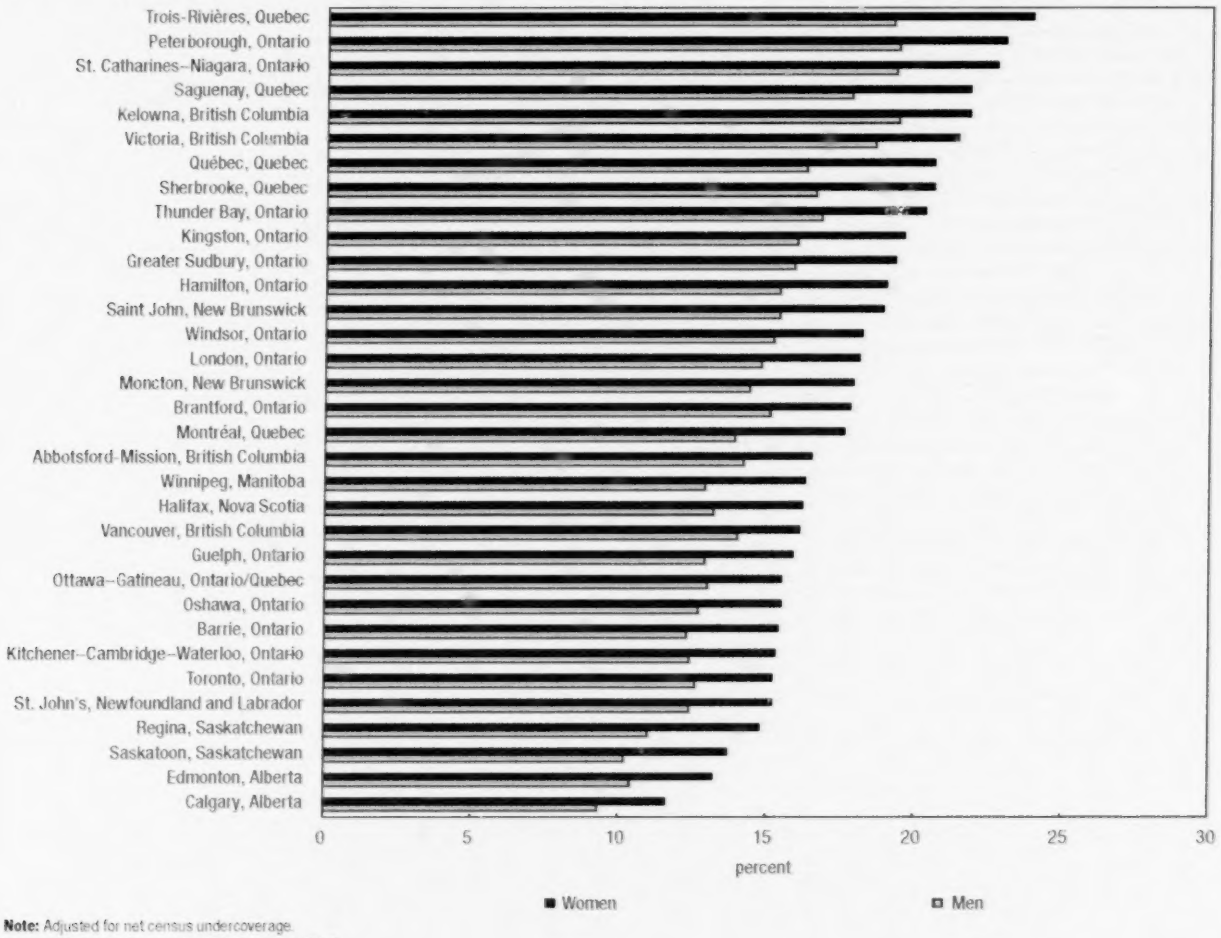
From another perspective, on July 1, 2015, less than half the senior population of Yukon (47.8%) and Nunavut (48.8%) were women, while the proportion exceeded 50% in each of the provinces and the Northwest Territories, and was highest in Ontario (55.2%), Quebec and Manitoba (55.1% each), and Nova Scotia and Saskatchewan (54.8% each).

Despite the lower overall proportions of seniors in their female populations, on July 1, 2015, Saskatchewan (33.5%) and Manitoba (31.4%) had the largest shares of senior women composed of the oldest old, that is, women aged 80 and over. In Nunavut, 10.1% of the senior population were aged 80 and over, as were 17.5% in Yukon.

At the census metropolitan area (CMA) level, the shares of senior women and senior men were much larger in certain regions (Chart 5). On July 1, 2015, Trois-Rivières (23.9%), Peterborough (23.0%), St. Catharines–Niagara (22.7%) and Saguenay and Kelowna (21.8% each) were the CMAs with the highest proportions of senior women in their female populations. Although the share of senior men in the male population was also high in these CMAs, the order differed slightly, with the largest shares found in Kelowna and Peterborough (19.4% each), St. Catharines–Niagara (19.3%) and Trois-Rivières (19.2%). In contrast, on July 1, 2015, the smallest shares of senior women in the female population were found in the CMAs of Alberta and Saskatchewan: Calgary (11.6%), Edmonton (13.2%), Saskatoon (13.7%) and Regina (14.8%). These CMAs also had the four lowest proportions of senior men in their male populations.

Based on the 2011 Census, 14.9% of the female population living in rural areas were seniors, a proportion similar to that for Canada overall. The proportion was slightly higher in small (17.2%) and medium (16.6%) population centres and slightly lower (14.0%) in large urban population centres.

Chart 5
Proportion of the population aged 65 and over, by sex, census metropolitan areas, July 1, 2015



Note: Adjusted for net census undercoverage.
Source: Statistics Canada, CANSIM Table 051-0056.

Many women living to the oldest ages

Many trends among senior women, including the increasing proportions of the oldest old, are related to their higher life expectancy. In fact, baby girls and boys born in Canada today can expect to live longer than ever before. Based on the mortality conditions observed between 2009 and 2011, a baby girl born during this period could expect to live 83.6 years, up from 66.3 years if she experienced the mortality conditions observed in 1941 (Table 4).[8] For baby boys, life expectancy has increased from 63.0 years in 1941 to 79.3 years in 2009/2011. During the past 10 years, the life expectancy of females increased on average by 2.4 months annually, while that of males achieved higher average gains, at 3.6 months annually, primarily as a result of some women's health-related behaviours, such as smoking, converging with those of men.[9] Men have historically been more affected by heart problems than women and, therefore, also benefited to a greater degree from advancements in cardiac health.[10] Consequently, the gap in life expectancy at birth between females and males was 4.3 years in 2009/2011, down from more than 7 years in the 1970s.

Individuals who survive to age 65 can also expect to live longer than in the past. During the 2009/2011 period, at age 65, a woman could expect to live an additional 21.7 years and a man, an additional 18.8 years, a difference of 2.9 years. In 1941, at age 65, women and men could expect to live an additional 14.1 and 12.8 years, respectively, a difference of 1.3 years.

8. Life expectancy in this chapter is based on period life expectancy, which is the average number of years individuals of a given population would be expected to live if they experienced, through the course of their life, the age-specific probabilities of dying observed during a given calendar year or period.
9. Martel, L. 2013. "Mortality: Overview, 2010 and 2011." *Report on the Demographic Situation in Canada*. Statistics Canada Catalogue no. 91-209-X.
10. For more information, see L. Greenberg and C. Normandin. 2011. "Disparities in life expectancy at birth." *Health at a Glance*. Statistics Canada Catalogue no. 82-624-X and Y. Decady and L. Greenberg. 2014. "Ninety years of change in life expectancy." *Health at a Glance*. Statistics Canada Catalogue no. 82-624-X.

Table 4
Life expectancy at birth and at age 65, by sex, Canada, 1941 to 2009/2011

	Females		Males	
	At birth	At age 65	At birth	At age 65
Year	in years			
1941	66.3	14.1	63.0	12.8
1945	68.0	14.5	64.7	13.1
1950/1952	70.8	15.0	66.3	13.3
1955/1957	72.9	15.6	67.6	13.4
1960/1962	74.2	16.1	68.4	13.5
1965/1967	75.2	16.7	68.8	13.6
1970/1972	76.4	17.5	69.3	13.7
1975/1977	77.5	18.0	70.2	14.0
1980/1982	79.0	18.9	71.9	14.6
1985/1987	79.7	19.1	73.0	14.9
1990/1992	80.9	19.8	74.5	15.7
1995/1997	81.1	19.9	75.4	16.2
2000/2002	82.0	20.4	76.9	17.0
2005/2007	82.8	21.1	78.2	18.0
2006/2008	83.0	21.2	78.4	18.2
2007/2009	83.1	21.4	78.6	18.3
2008/2010	83.4	21.6	79.0	18.6
2009/2011	83.6	21.7	79.3	18.8

Sources: Statistics Canada, official life tables, 1941 to 1985/1987 and Demography Division, 1990/1992 to 2009/2011.

Although the life expectancy of senior women and men is relatively high for Canada overall, there is some variation between the provinces and territories. For females born in 2009/2011, life expectancy at birth was highest in British Columbia, at 84.4 years (Table 5). This was also the only province or territory where the life expectancy for males surpassed 80 years (80.3 years). In the Northwest Territories (80.1 years) and Yukon (79.6 years)—territories with a high Aboriginal population, for whom life expectancy is lower[11]—life expectancy for females during the 2009/2011 period was about four years lower than for the country overall, and in Nunavut (73.9 years), this difference was close to 10 years. Nunavut has a predominantly Inuit population, who, in turn, have a shorter life expectancy than other Aboriginal groups.

Table 5
Life expectancy at birth and at age 65, by sex, Canada, provinces and territories, 2009/2011

	Females		Males	
	At birth	At age 65	At birth	At age 65
Region	in years			
Newfoundland and Labrador	82.0	20.4	77.1	17.3
Prince Edward Island	82.9	21.0	78.2	18.0
Nova Scotia	82.6	20.8	78.1	17.9
New Brunswick	83.1	21.2	78.4	18.4
Quebec	83.6	21.6	79.4	18.6
Ontario	83.9	21.9	79.8	19.0
Manitoba	82.2	21.3	77.7	18.1
Saskatchewan	82.2	21.4	77.2	18.3
Alberta	83.5	21.8	79.1	18.8
British Columbia	84.4	22.3	80.3	19.7
Yukon	79.6	18.9	75.2	16.2
Northwest Territories	80.1	20.2	76.3	17.8
Nunavut	73.9	15.4	68.8	14.6
Canada	**83.6**	**21.7**	**79.3**	**18.8**

Source: Statistics Canada. 2013. *Life Tables, Canada, Provinces and Territories, 2009 to 2011*, catalogue no. 84-537.

Internationally, data from the Organisation for Economic Co-operation and Development (OECD) for 2013 or the latest available year,[12] indicate that female life expectancy at birth was highest in Japan (86.6 years), followed by Spain (86.1), France (85.6), Italy (85.2) and South Korea (85.1). In comparison, male life expectancy at birth was highest in Switzerland (80.7 years), Iceland (80.5), Italy and Israel (80.3 each), and Japan, Spain and Sweden (80.2 each). In the United States, life expectancy at birth in 2013 was 81.2 years for females and 76.4 years for males. In the least industrialized part of the world, life expectancy at birth today was about 63 years for females (and about 60 years for males), and in some Southern African countries such as Swaziland and Lesotho, on average, newborn girls can expect to live less than 50 years, based on recently observed mortality conditions.[13]

11. Morency, J.-D., E. Caron-Malenfant, S. Coulombe and S. Langlois. 2015. *Projections of the Aboriginal Population and Households in Canada, 2011 to 2036*. Statistics Canada Catalogue no. 91-552-X.
12. Organisation for Economic Co-operation and Development. 2015. doi: 10.1787/27e0fc9d-en (Accessed on 10 November 2015).
13. Population Reference Bureau. 2015. *2015 World Population Data Sheet*.

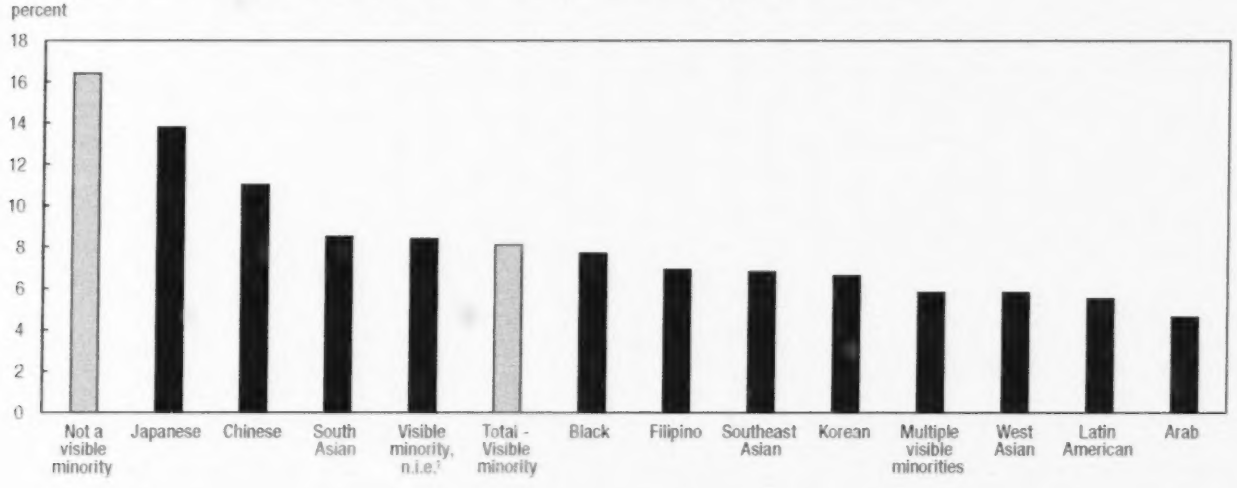
Diversity within the population of senior women[14]

The diverse characteristics within population groups influence both the age structure and the pace of population aging. According to the 2011 NHS, 6.3% of Aboriginal females were aged 65 and over, compared with 15.2% of non-Aboriginal females,[15,16] a difference resulting largely from the patterns of higher fertility and lower life expectancy for Aboriginal women. Among single identity Aboriginal females, the share of seniors was largest for Métis (6.7%) and First Nations[17] (6.0%) females.[18] The Inuit female population was the youngest of the single identity Aboriginal populations, with 4.4% being 65 years and over. Similarly, in 2011, 5.5% of Aboriginal males were aged 65 and over, with the highest proportions for Métis (6.4%), followed by First Nations (5.0%) and Inuit (3.7%) males.

Consistent with their younger age structure, a smaller proportion of Aboriginal females were in the oldest age group (80 years and over). Specifically, 0.9% of Aboriginal females were aged 80 and over, compared with 3.9% of non-Aboriginal females. From another perspective, among women aged 65 and over, 14.7% of Aboriginal women were aged 80 and over, as were 25.5% of non-Aboriginal women. Among senior men, 11.8% of Aboriginal men were aged 80 and over, as were 20.3% of non-Aboriginal men.

The age structure of senior women also reflects their visible minority status[19] and immigrant status[20]. A lower proportion of females who reported belonging to a visible minority group (8.1%) were aged 65 years and over in 2011, compared with the rest of the female population (16.4%). More than 1 in 10 Japanese (13.8%) and Chinese (11.0%) females—groups with a long history of residence in Canada[21]—were aged 65 and over, while the proportions were lowest for West Asian (5.8%), Latin American (5.5%) and Arab (4.6%) females (Chart 6). For males, 7.3% of those who reported belonging to a visible minority group were seniors, compared with 14.2% of other males.

Chart 6
Proportion of the female population aged 65 and over, by visible minority group, Canada, 2011



1. The abbreviation "n.i.e." means "not included elsewhere." Includes respondents who reported a write-in response such as "Guyanese," "West Indian," "Tibetan," "Polynesian," "Pacific Islander," etc.

Source: Statistics Canada, National Household Survey, 2011.

14. This section is based on the 2011 NHS. Therefore, one person in the household may have completed the census questionnaire for all household members, particularly for children. Consequently, while aspects of diversity such as visible minority status or immigrant status are often referred to in the census as self-reported, they may be reported by the respondent on behalf of individual household members. NHS data are based on the population in private households.
15. The term "Aboriginal identity" refers to whether a person reported being an Aboriginal person, that is, First Nations (North American Indian), Métis or Inuk (Inuit), and/or being a Registered or Treaty Indian (registered under the *Indian Act* of Canada), and/or being a member of a First Nation or Indian band. Aboriginal peoples of Canada are defined in the *Constitution Act, 1982*, section 35 (2) as including the Indian, Inuit and Métis peoples of Canada.
16. Some organizations consider senior Aboriginal women as those aged 55 and over. In 2011, 15.0% of Aboriginal females were aged 55 and over, as were 28.7% of non-Aboriginal females. For males, these proportions were 13.7% and 26.5%, respectively.
17. Respondents self-identified as "First Nations (North American Indian)" on the 2011 National Household Survey questionnaire. However, the term "First Nations" people is used throughout this chapter.
18. For more information on Aboriginal identity, see the First Nations, Métis and Inuit Women chapter of *Women in Canada*.
19. The visible minority population is defined by the *Employment Equity Act* as "persons, other than Aboriginal peoples, who are non-Caucasian in race or non-white in colour". The visible minority population consists mainly of the following groups: South Asian, Chinese, Black, Filipino, Latin American, Arab, Southeast Asian, West Asian, Korean and Japanese.
20. The NHS immigrant population data include a small number of immigrants born in Canada, for example, children born to foreign diplomats posted to Canada, and exclude non-permanent residents. The non-immigrant population is also often referred to as the Canadian-born population, although it includes a small number of people born outside Canada, for example, the children of Canadian diplomats born abroad.
21. For more information, see T. Chui and J. Flanders. 2013. *Immigration and Ethnocultural Diversity in Canada*. Statistics Canada Catalogue no. 99-010-X2011011.

Among the senior women who did not belong to a visible minority group, 25.9% were aged 80 and over; for visible minority women, the share was 20.9%. The proportion of senior women who were aged 80 and over was highest for Japanese (31.9%), Chinese (26.3%) and Southeast Asian (25.3%) women. For senior men who did not belong to a visible minority group, the proportion aged 80 and over was 20.5%, higher than for visible minority men (17.3%). Similar to women, the proportion of visible minority senior men who were aged 80 and over was highest for Japanese men (29.2%).

Immigrant females are older than non-immigrant females.[22] Although immigrants often arrive in Canada at relatively young ages, a large proportion have been in the country for many years. About one-fifth (20.5%) of immigrant females were aged 65 and over in 2011, while the proportion of non-immigrant females who were seniors was 13.4%. Nearly one-quarter (24.0%) of immigrant females who arrived prior to 2006 were seniors, compared with 3.6% of recent immigrants, that is, those who arrived between 2006 and 2011. Among the male population, 19.6% of immigrants (3.1% of recent immigrants) were aged 65 and over in 2011, while 11.3% of non-immigrants were seniors.

Overall, a higher proportion of immigrant females (5.4%) than non-immigrant females (3.3%) were aged 80 and over. For immigrant females who arrived before 2006, 6.5% were aged 80 and over, while 0.4% of those who arrived between 2006 and 2011 were this age.

The majority of senior immigrant women were European-born. In 2011, close to 6 in 10 senior immigrant women in Canada were born in Europe (57.3%)—with the largest shares born in the United Kingdom (16.5%) and Italy (9.9%)—followed by Asia (26.2%), Central America, South America, the Caribbean and Bermuda (8.6%) and Africa (3.0%). A relatively small share of senior immigrant women (4.0%) were born in the United States.

In the Toronto CMA, long known to have a high proportion of immigrants, 18.8% of immigrant females were aged 65 and over in 2011, compared with 7.9% of non-immigrant females. In Vancouver, these proportions were 18.3% and 10.6%, respectively. There was a smaller differential in Montréal, where 18.1% of immigrant females and 14.0% of non-immigrant females were seniors. From another perspective, 29.4% of senior women at the national level were immigrants in 2011, with the proportions being much higher in CMAs such as Toronto (68.5%) and Vancouver (55.9%), and smaller in Montréal (27.6%), than for Canada as a whole.

In 2011, 5.5% of women aged 65 and over did not have sufficient knowledge of an official language (English or French) to conduct a conversation. Among women aged 15 to 64, the proportion was 1.3%. Among senior immigrant women, the share without such knowledge was larger, at 18.3%, and of those who had recently immigrated (between 2006 and 2011), the majority (54.7%) did not have knowledge of an official language. In contrast, among 15- to-64-year-old women, 5.1% of immigrants did not have knowledge of either English or French, and for recent immigrants, the proportion was 8.8%. Patterns were similar for men, although there were smaller shares of men who were unable to conduct a conversation in either English or French.[23]

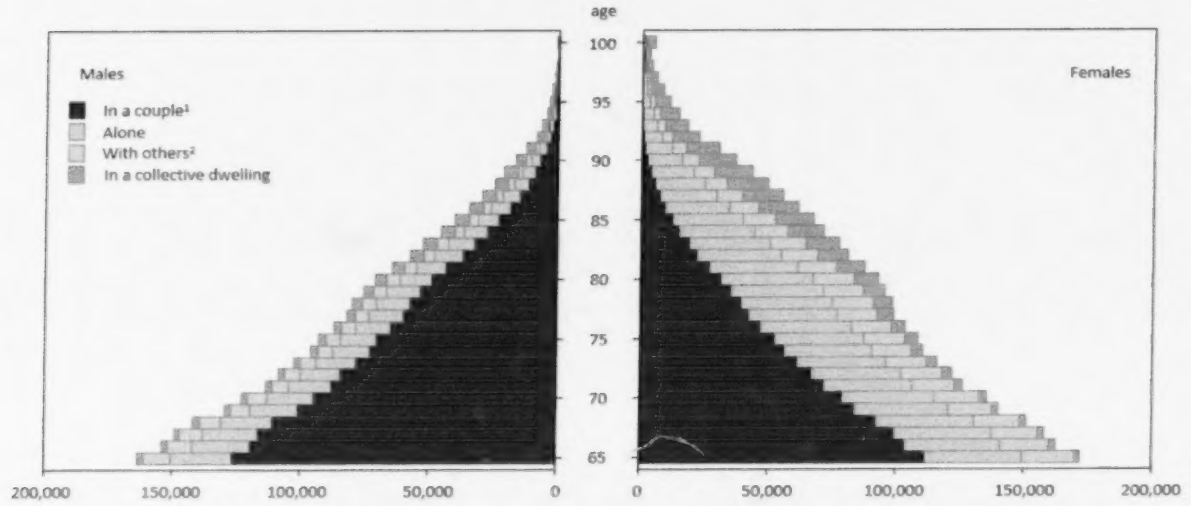
As another aspect of diversity, senior women more often identified with a religious denomination than younger women. A higher proportion of senior women (90.3%) and senior men (85.4%) reported a religion in 2011, compared with 15- to-64-year-old women (77.2%) and men (72.3%). About 8 in 10 senior women (84.9%) and senior men (79.7%) reported a Christian religion, with Catholic being most prevalent (reported by 43.9% of senior women and 41.9% of senior men). About 1 in 10 senior women (9.7%) and 14.6% of senior men reported no religion. Among 15- to 64-year-olds, these proportions were 22.8% for women and 27.7% for men.

Most senior women live in private households until the oldest ages

Most women and men aged 65 and over live in private households. In 2011, 89.9% of women aged 65 and over lived in private households, as did 94.7% of senior men, while the remaining shares (10.1% and 5.3%, respectively) lived in collective households or dwellings. The specific living arrangements of senior women and men varied with age (Chart 7).[24] The proportions of senior women and senior men living in private households decreased with age, although they still represented the majority of women (64.8%) and men (77.4%) aged 85 and over in 2011.

22. According to the 2011 NHS, the median age—the age at which half the population is older and half is younger—of immigrant females was 47.4 years and the median age of non-immigrant females was 38.4 years.
23. For example, among senior immigrant men, 11.1% did not have knowledge of an official language, the proportion increasing to 43.8% for those who immigrated between 2006 and 2011. For immigrant men aged 15 to 64, these shares were 3.5% and 6.6%, respectively.
24. The proportions of seniors in private households living in a couple, alone or with others, based on census data, are presented as a share of the combined senior population living in private households and collectives. Data on living arrangements from the 2011 NHS are based on private households only.

Chart 7
Age pyramid for the population aged 65 and over, by living arrangement and sex, Canada, 2011



1. Refers to married spouses and common-law partners.
2. "With others" includes seniors who are lone parents, living with other relatives and/or non-relatives, or adult children living with their parent(s).

Note: Persons aged 100 and over are included at age 100.

Source: Milan, A., N. Bohnert, S. LeVasseur and F. Pagé. 2012. "Living arrangements of seniors." *Census in Brief*, Statistics Canada Catalogue no. 98-312-X.

Overall, more than 4 in 10 (43.8%) senior women were part of a couple in 2011, compared with more than 7 in 10 (72.1%) senior men (Table 6). Most women in their late sixties (62.7%) were part of a couple, as were 77.9% of men in this age group. The share dropped with age, and by age 85 and over, 10.4% of women were part of a couple. The majority of senior men were part of a couple into their oldest years, largely reflecting differences in life expectancy by sex, with women generally living longer, as well as tending to be about two years younger than their spouses or partners. At age 85 and over, 46.2% of men were part of a couple.

Table 6
Distribution of living arrangements for population aged 65 and over, by age group and sex, Canada, 2011

	Women					Men				
		In a private household					In a private household			
Age group	Total	In a couple	Alone	With others	In a collective dwelling	Total	In a couple	Alone	With others	In a collective dwelling
	percent									
65 to 69 years	**100.0**	62.7	24.0	11.8	1.5	**100.0**	77.9	14.4	6.1	1.7
70 to 74 years	**100.0**	55.1	28.6	13.4	3.0	**100.0**	77.2	14.6	5.9	2.4
75 to 79 years	**100.0**	43.0	35.0	15.6	6.4	**100.0**	73.4	15.8	6.4	4.4
80 to 84 years	**100.0**	27.8	40.2	17.4	14.6	**100.0**	65.0	18.6	7.4	9.0
85 years and over	**100.0**	10.4	36.6	17.8	35.2	**100.0**	46.2	21.8	9.5	22.6
65 years and over	**100.0**	**43.8**	**31.5**	**14.6**	**10.1**	**100.0**	**72.1**	**16.0**	**6.6**	**5.3**

Source: Statistics Canada, Census of Population, 2011.

There is an increasing tendency, however, to be part of a couple at older ages, particularly among senior women. For example, 43.0% of women aged 75 to 79 were part of a couple in 2011, up from 36.5% 10 years earlier. For men, who already were more likely than women to be part of a couple, there was a more modest increase, from 71.6% in 2001 to 73.4% in 2011. More seniors in couples can be at least partly attributed to Canadians' higher life expectancy for both sexes. Life expectancy, however, has been increasing more rapidly for men than for women during the last several decades, which can enable relationships to exist well into the senior years. There was a corresponding decrease in the proportion living alone for both senior women and senior men over the past decade.

About 1 in 7 senior women (14.6%) lived with others in 2011, for example, with their adult children or with other relatives or non-relatives,[25] the proportion increasing across age groups, from 11.8% at ages 65 to 69 to 17.8% at ages 85 and over. A smaller share (6.6%) of senior men lived with others, a share which increased for the oldest age groups.

25. Living with adult children refers to seniors living as lone parents—that is, with sons and daughters who do not have their own married spouse, common-law partner or children in the same household. Living with relatives could include living with adult children who have their own married spouse, common-law partner or children in the same household or with siblings, cousins, nephews or nieces or other extended family members. Refer to the definition of census family in the *Census dictionary* for more information.

Senior women also varied in their living arrangements, according to select characteristics. Compared with the 48.8% of senior women without an Aboriginal identity who lived with a married spouse or common-law partner, a smaller proportion of senior Aboriginal women (41.9%) did so. For senior women with a single Aboriginal identity, the proportion living as part of a couple was highest for Métis (45.4%), followed by Inuit (40.9%) and First Nations (39.5%) women.

A slightly lower proportion of senior visible minority women (45.2%) than other senior women (49.1%) were part of a couple. There were differences, however, by visible minority group, for instance, 63.5% of senior Korean women lived as part of a couple, twice the proportion of senior Black women (31.0%).

While about half of both senior non-immigrant (48.7%) and senior immigrant (48.6%) women lived as part of a couple, a lower proportion of senior women who arrived in Canada between 2006 and 2011 (42.6%) did so.

The majority of senior women and men in couples were married. In 2011, of the 1.2 million women aged 65 and over who were in a union, 94.8% were married spouses and the remaining 5.2% were common-law partners. Despite the smaller share of seniors who live common-law, growth has been more rapid for common-law partners than for married spouses in recent years. In the five years between 2006 and 2011, the number of senior women who were common-law partners grew 67.8% compared with a growth of 16.4% for those who were married spouses. Patterns related to conjugal status were similar for senior men, with the number of common-law partners growing by 49.3% between 2006 and 2011 and the number of married spouses growing by 14.0% during the same period.

While most individuals aged 65 and over in couples in 2011 were in opposite-sex relationships, about 3,100 senior women and 4,900 senior men were in same-sex couples, accounting for 5.2% of all women in same-sex couples and 7.0% of all men in same-sex couples.

According to the 2011 General Social Survey (GSS), more than three-quarters (77%) of all seniors had been in only one union, including both marriages and common-law unions. A smaller proportion of women (16%) than men (23%) had been part of more than one union.[26,27] Close to three-quarters (73%) of seniors who had a second union had chosen marriage, while over one-quarter (27%) had chosen a common-law union.[28] Among the next generation of seniors, women and men aged 55 to 64, about two-thirds (67%) had been part of one union. Consequently, the family lives of seniors could become more complex in the future, to the extent that multiple unions create both former as well as current kin, with potential corresponding expectations or obligations regarding emotional, financial or other types of support.

About 8% of senior women share a home with grandchildren

A large majority of senior women and men are grandparents. According to the 2011 GSS, about 9 in 10 Canadians aged 65 and over were grandparents, with little difference between women and men. Data from the 2011 NHS provide information on seniors who co-reside (live in the same dwelling) with at least one of their grandchildren. In 2011, nearly 200,000 women aged 65 and over were grandmothers who shared a home with one or more grandchildren—either in the presence or absence of the parental generation—accounting for 8.0% of this age group. Among senior men, 5.7% were grandparents living with their grandchildren.

Among grandmothers sharing a home with grandchildren, 88.2% were there with the middle generation—primarily a couple—while 11.8% were in a skip-generation home. Patterns were similar for senior grandfathers co-residing with grandchildren.

Sharing a home with grandchildren was more common among senior women with certain characteristics. The majority of senior immigrant women (63.5%) who arrived in Canada between 2006 and 2011 (recent immigrants) co-resided with grandchildren in 2011, compared with 4.1% of non–immigrant senior women.[29] In addition, senior women who were South Asian (53.4%), Southeast Asian (40.0%), Filipino (38.3%) or Chinese (32.1%), were more likely to share a home with grandchildren than senior women who did not belong to a visible minority group (4.7%). Senior men with these characteristics were also more likely than those without them to share a home with grandchildren, but in lower proportions than senior women. Grandparents may co-reside with grandchildren for many different reasons, which include but are not limited to cultural expectations, health issues and economic benefits. In particular, at the time of the 2011 NHS, parents or grandparents entering Canada through the Family Reunification Program were required to be financially supported by their sponsors during their first decade of residence.[30]

26. In addition, a small proportion of seniors had never been in a married or common-law union.
27. According to the 2011 Census, 12.1% of senior women and 11.8% of senior men in private households had a legal marital status of divorced or separated. Proportions were higher for younger seniors: 17.7% of women aged 65 to 69 had a legal marital status of divorced or separated in 2011, falling to 5.6% of those aged 80 and over. For men, these respective proportions were 15.9% and 5.9%.
28. Milan, A., I. Wong and M. Vézina. 2014. "Emerging trends in living arrangements and conjugal unions for current and future seniors." *Insights on Canadian Society*. Statistics Canada Catalogue no. 75-006-X, February.
29. For more information on grandparents co-residing with their grandchildren, see A. Milan, N. Laflamme and I. Wong. 2015. "Diversity of grandparents living with their grandchildren." *Insights on Canadian Society*. Statistics Canada Catalogue no. 75-006-X, April.
30. While this was true at the time of the NHS collection (in 2011), the program subsequently underwent some changes. For details, refer to CIC Operational Bulletin 561, titled *New Regulations for sponsors of parents and grandparents*.

Not only are Aboriginal females demographically distinct, they also have unique characteristics related to their living arrangements, and in particular, co-residence with grandchildren. Senior Aboriginal women were almost twice as likely to live with grandchildren (15.3%) as senior non-Aboriginal women (7.8%). Co-residing Aboriginal grandmothers were also more likely to be in skip-generation homes (38.8% of co-residing grandmothers), that is, without the presence of a middle generation, than co-residing non-Aboriginal grandmothers (10.9%).[31,32]

More than 3 in 10 senior women live alone

Although many seniors live as part of a couple, living alone was the second most common living arrangement for both senior women and senior men; patterns differed, however, by both age and sex. In total, 31.5% of senior women lived alone in a private household in 2011, compared with 16.0% of senior men. As shares in couples declined with age for both senior women and men, the share who lived alone generally increased throughout the senior years. For senior women, 24.0% of those aged 65 to 69 lived alone. The proportion increased to 40.2% for women aged 80 to 84 and then declined to 36.6% at ages 85 and over as the proportion living in collective dwellings increased. For men, the proportion who lived alone was 14.4% at ages 65 to 69, increasing to 21.8% among those aged 85 and over. Living alone, particularly at the oldest ages, can have implications for seniors, regarding care from family or friends, safety issues as well as for housing needs and financial circumstances.

A slightly lower proportion of senior Aboriginal women in private households (31.7%) lived alone in 2011, compared with senior non-Aboriginal women (35.3%). For senior single identity Aboriginal women, the proportion living alone was higher for Métis (33.7%) and First Nations (30.4%) women than for Inuit women (16.7%).

Senior visible minority women were about half as likely to live alone (16.8%) as other women (37.5%). The smallest share was for South Asian senior women, of whom 9.4% lived alone, which corresponds to larger shares of this group living with grandchildren or other relatives.

While 27.9% of senior immigrant women in private households lived alone in 2011, 38.4% of senior non-immigrant women did so. Among senior immigrant women who had arrived in the five years prior to 2011, 6.0% lived alone. Among senior men, 13.0% of immigrants and 19.1% of non-immigrants lived alone. A relatively small share of senior immigrant men (3.4%) who arrived in Canada between 2006 and 2011 lived alone.

7 in 10 seniors in collective dwellings are women

Most people aged 65 and over living in collective dwellings are women. Of the 393,100 seniors who lived in a collective or institutional residence in 2011, about 7 in 10 were women. The proportions of both senior women and senior men living in collective dwellings were relatively low until about age 80, but were much higher in the older age groups. For women aged 65 to 69, 1.5% lived in collective dwellings increasing to 35.2% for those aged 85 and over, compared with 1.7% and 22.6% for men in these age groups.

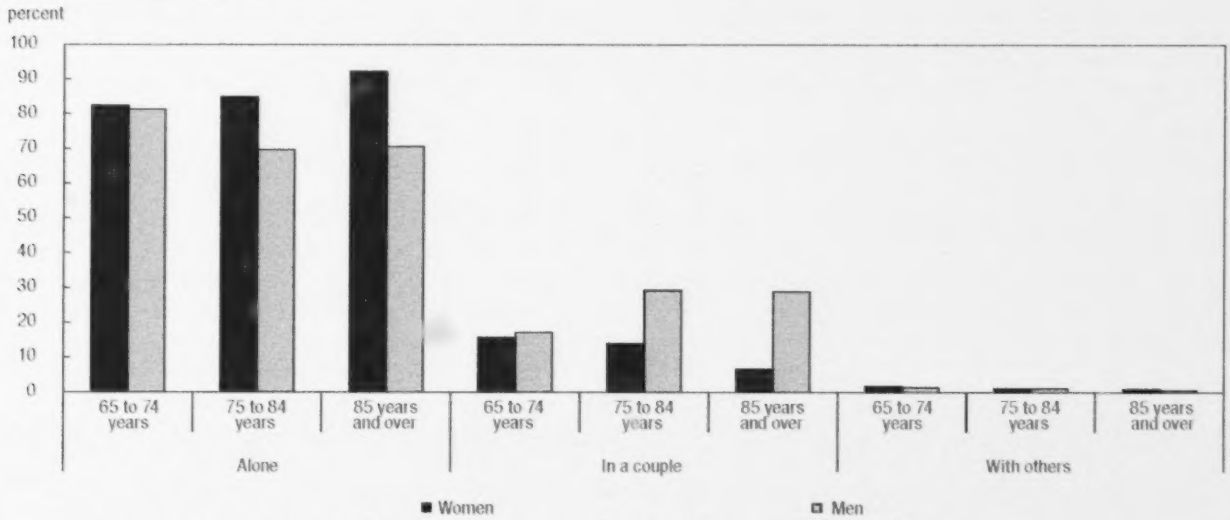
The main type of collective dwelling in which women and men aged 65 and over lived in 2011 were nursing homes[33] (54.9% of senior women and 51.0% of senior men). Among seniors living in collective dwellings, the share of women in nursing homes increased with age, from 36.5% at ages 65 to 69 to 59.9% at ages 85 and over, and the shares for men increased from 32.3% to 56.3% for these age groups.

The second most common type of collective dwelling in which senior women lived were residences for senior citizens[34] (33.5% of senior women and 30.3% of senior men). Some assistance is provided in these residences, but residents are primarily independent. According to the 2011 Census, 127,900 seniors, or 2.6% of the population aged 65 and over, lived in seniors' residences, 72.3% of whom were women and 27.7% of whom were men.[35] The proportion of women living in seniors' residences increased from 24.1% for women in their early sixties to 32.0% for women aged 85 and over, although it peaked at 38.0% for women in their early eighties. For men, the share living in seniors' residences increased fairly steadily, from 16.1% for men in their early sixties to 34.0% at ages 85 and over.

Most women and men aged 65 and over who lived in residences for seniors lived alone, that is, without a spouse, partner or other family member in their residential unit (88.6% of women and 71.8% of men). Relatively smaller proportions of women and men in these residences lived as part of a couple (10.3% of women and 27.3% of men). While the share of senior women in seniors' residences who lived alone increased with age, and those who lived as part of a couple decreased with age, the pattern was different for men (Chart 8). The proportion of women who were part of a couple fell from 15.7% for those aged 65 to 74 to 6.7% for those aged 85 and over, while 17.2% of men aged 65 to 74 lived in a couple and it was relatively stable at about 29% for those aged 75 and over.

31. Proportions were similar for senior men: 11.8% of Aboriginal men aged 65 and over lived with one or more grandchildren, as did 5.6% of non-Aboriginal men. Among senior co-residing grandfathers, 38.0% of Aboriginal men were in skip-generation homes, as were 12.3% of non-Aboriginal men.
32. In 2011, about three times as many First Nations women aged 65 and over who lived on reserve shared a home with at least one grandchild (33.9%) as did those who lived off reserve (12.4%).
33. Nursing homes are long-term care facilities which provide a range of health care services, from periodic assistance to regular nursing care for elderly residents. These facilities provide professional health monitoring and skilled nursing care 24/7. Residents are not independent in most activities of daily living.
34. Residences for senior citizens refer to collective dwellings that provide support services (such as meals, housekeeping, mediation supervision, assistance with bathing) and supervision for elderly residents who are independent in most activities of daily living.
35. Milan, A., N. Bohnert, S. LeVasseur and F. Pagé 2012. "Living arrangements of seniors." *Census in Brief*. Statistics Canada Catalogue no. 98-312-X2011003.

Chart 8
Distribution of population aged 65 and over living in residences for senior citizens, by living arrangement, age group and sex, Canada, 2011

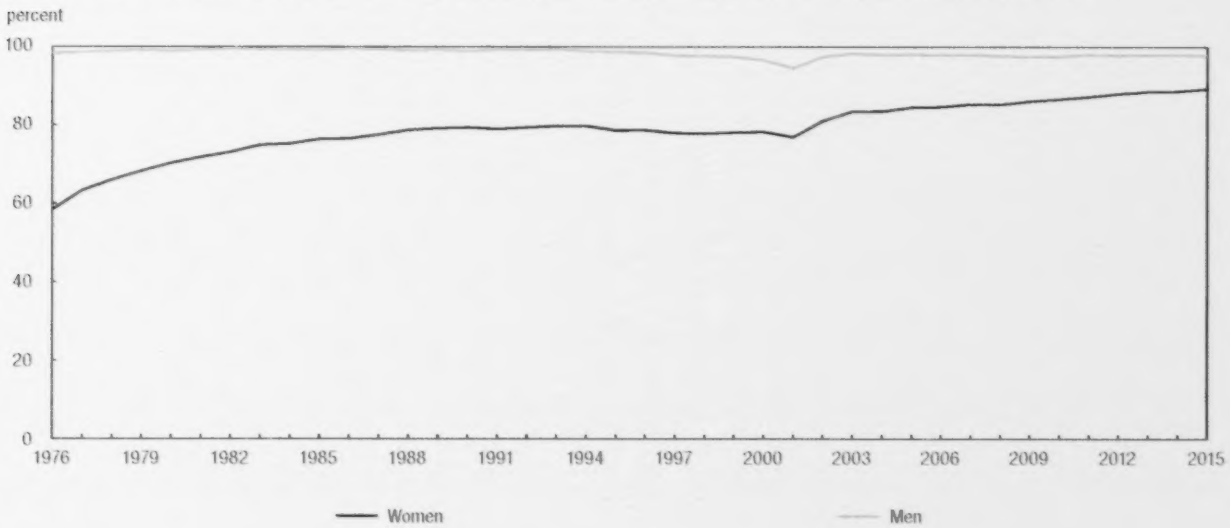


Source: Milan, A., N. Bohnert, S. LeVasseur and F. Pagé. 2012. "Living arrangements of seniors." *Census in Brief*, Statistics Canada Catalogue no. 98-312-X.

Proportion of senior women who ever worked for pay in their lifetime continues to rise

Over the last century, women have increasingly become labour force participants. As such, the proportion of senior women who have ever had paid employment in their lifetime[36] has steadily increased. In 1976, 58.4% of women aged 65 and over had worked for pay in their lifetime (Chart 9). By 2005, this proportion had increased to 84.5%, and it has continued to increase, such that in 2015, 89.3% of senior women reported that they had worked for pay during their lifetime. While this proportion was still lower than that for senior men in 2015, the gap (8.6 percentage points) had narrowed considerably since 1976 (40.0 percentage points).

Chart 9
Women and men aged 65 years and over who ever had paid employment in their lifetime, Canada, 1976 to 2015



Source: Statistics Canada, Labour Force Survey, 1976 to 2015, custom tabulation.

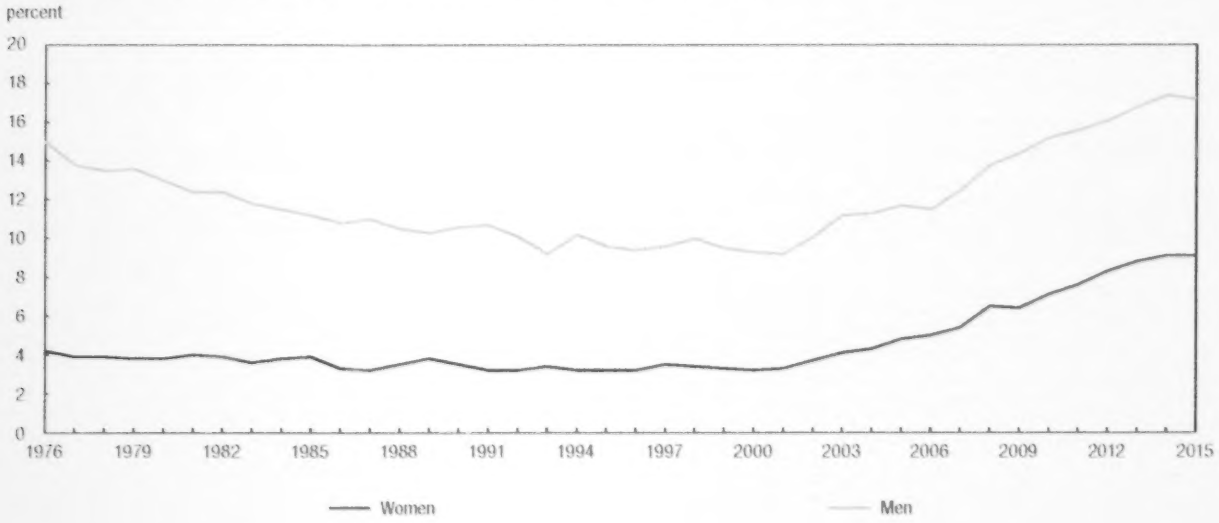
36. In the Labour Force Survey, the concept of "ever worked" refers to persons who worked at a job or business at any point in their lifetime. This measure does not account for the duration of their employment (e.g., whether one worked for one year or 20 years) or the age at which they were employed.

The employment rate among senior women has nearly doubled over the last decade

The employment rate among women aged 65 and over nearly doubled in the decade spanning 2005 to 2015 (Chart 10). In 2005, the employment rate among senior women was 4.8%, compared with 9.1% in 2015. The employment rate also increased for senior men during this time, from 11.7% in 2005, to 17.2% in 2015.

Among senior women, increasing employment rates since the 2000s contrast with the relatively stable employment rates in the three preceding decades. For senior men, the increase marks a reversal in what had generally been a downward trend since the 1970s.

Chart 10
Employment rates of women and men aged 65 and over, Canada, 1976 to 2015



Source: Statistics Canada, Labour Force Survey, CANSIM table 282-0002.

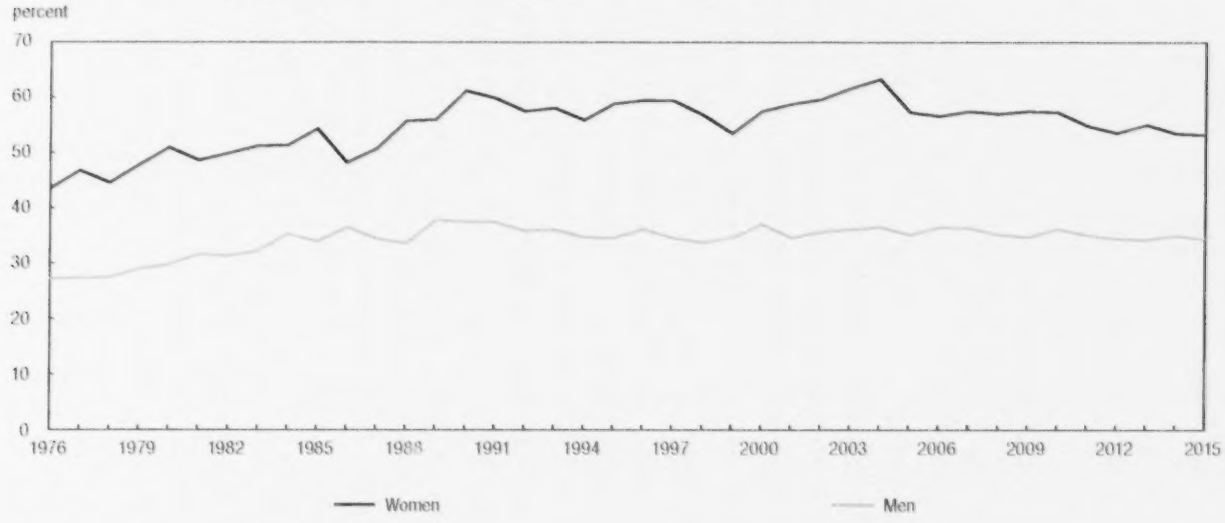
Part-time work is more common among seniors, especially senior women

In 2015, 53.2% of employed women aged 65 and over were working in a part-time[37] position (Chart 11). A smaller proportion of employed senior men (34.3%) reported that they typically worked part time. Senior women and men were more likely to work part time compared with 15- to-64-year-olds, among whom 25.5% of women and 11.0% of men worked part time.

Working part time may be voluntary. For example, an individual may choose to work part time for health reasons, or to meet family responsibilities. On the other hand, working part time may reflect difficulty finding full-time work. Among those who worked part time, seniors were far more likely than younger persons to do so voluntarily. In 2015, the vast majority of senior women (92.2%) and senior men (90.6%) aged 65 and over who worked part time were doing so voluntarily, compared with 73.5% and 69.2% of women and men, aged 15 to 64. Conversely, 7.8% of senior women and 9.4% of senior men who worked part time were doing so involuntarily, compared with 26.5% of women and 30.8% of men aged 15 to 64 (data not shown).

37. A person is considered to work part time if they usually work less than 30 hours per week at their main or only job.

Chart 11
Part-time work among employed women and men aged 65 and over, Canada, 1976 to 2015

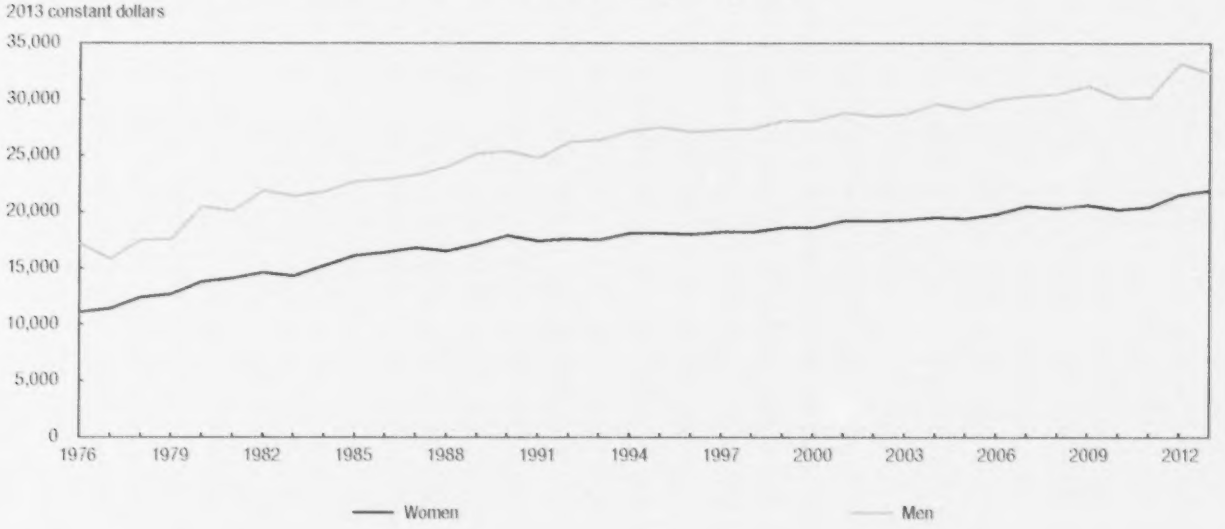


Source: Statistics Canada, Labour Force Survey, CANSIM table 282-0002.

Median income of senior women has increased, but remains lower than that of senior men

The median total income from all sources of women aged 65 and over has followed an upwards trend since the mid-1970s. Over the ten-year period between 2003 and 2013, the median income of senior women increased from $19,300 to $21,900, a difference of $2,600 (Chart 12).[38] Senior women had a lower median income compared with senior men, whose income also rose during this time period, from $28,700 in 2003 to $32,300 in 2013. Indeed, since the early 1990s, the median income of senior men has been approximately 1.5 times higher than that of senior women.

Chart 12
Median total income of women and men aged 65 and over, Canada, 1976 to 2013



Source: Statistics Canada, Income Statistics Division, custom tabulation.

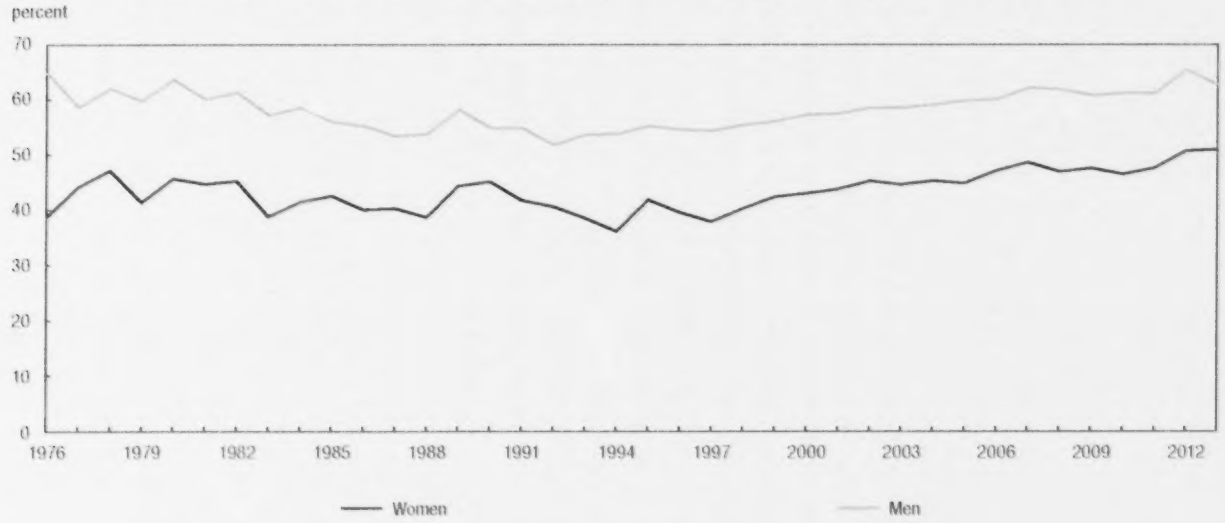
38. Income is reported in 2013 constant dollars.

Proportion of total income from market sources has risen for senior women and men

An individual's total income is the sum of two broad components: market income and government transfers. Market income includes employment earnings, such as wages, salaries, and self-employment income, as well as investment and retirement income. Government transfers, on the other hand, include income sources such as Old Age Security, Guaranteed Income Supplement and the Canada or Quebec Pension Plan.

In 2013, the proportion of senior women's total income that came from market sources was 11.7 percentage points lower than that of senior men (51.0% versus 62.6%). This marks the smallest gap since 1992 (Chart 13).

Chart 13
Market income as a proportion of total income among women and men aged 65 and over, Canada, 1976 to 2013



Source: Statistics Canada, Income Statistics Division, custom tabulation.

As the employment rate among the senior population has risen, so has the proportion of seniors' total income that comes from market sources. The share of senior women's total income that came from market sources increased from 44.6% in 2003 to 51.0% in 2013 (Table 7). During the same period, the share of senior men's total income that came from market sources rose from 58.6% to 62.6%. This rising share of income from market sources was primarily due to an increase in the proportion of total income from employment earnings, from 4.1% to 9.0% among senior women, and from 7.9% to 16.3% among senior men.

Among senior women, the proportion of total income from retirement income increased from 26.3% in 2003 to 31.5% in 2013. However, this was not the case among senior men. Their share of total income from retirement income decreased, from 40.7% in 2003 to 36.6% in 2013. This difference is in part due to the fact that, unlike senior men, the proportion of senior women who have had paid employment in their lifetime also increased during this time period. This increased their likelihood of having retirement income.

The share of senior women's and senior men's income from government transfers decreased between 2003 and 2013. For senior women, the proportion of total income from Old Age Security, Guaranteed Income Supplement, and Spouse's Allowance payments, specifically, decreased from 31.8% in 2003 to 26.3% in 2013. The decrease was smaller for senior men (from 18.4% to 16.7%). On the other hand, the share of senior men's total income from Canada Pension Plan or Quebec Pension Plan payments was smaller in 2013 (18.4%) compared with 2003 (20.3%), with no substantial change among senior women.

Table 7
Income sources as a percentage of total income of women and men aged 65 and over, Canada, 2003 and 2013

	2003		2013	
	Women	Men	Women	Men
Income sources	dollars (millions)			
Total income	**52,008**	**61,998**	**81,254**	**97,729**
	percentage			
Market income	**44.6**	**58.6**	**51.0**	**62.6**
Employment earnings	4.1	7.9	9.0	16.3
Wages, salaries and commissions	2.9	5.7	7.6	13.6
Self-employment income	1.1	2.1	1.5	2.7
Investment income	12.7	8.8	8.9	8.2
Retirement income	26.3	40.7	31.5	36.6
Other income	1.5	1.3	1.6	1.5
Government transfers	**55.4**	**41.4**	**49.0**	**37.4**
Old Age Security, Guaranteed Income Supplement and Spouse's Allowance	31.8	18.4	26.3	16.7
Canada Pension Plan and Quebec Pension Plan	20.6	20.3	19.9	18.4
Child benefits	F	F	F	F
Employment Insurance benefits	0.1	0.3	0.1	0.4
Workers compensation benefits	0.4	1.0	0.5	0.7
Goods and Services Tax and Harmonized Sales Tax credits	0.8	0.5	0.6	0.4
Provincial and territorial tax credits	1.2	0.8	1.0	0.7
Social assistance	0.5	0.1	0.6	0.1
Other government transfers	F	F	F	F

F too unreliable to be published
Source: Statistics Canada, Income Statistics Division, custom tabulation.

Prevalence of low income among senior women and men has risen since the mid-1990s

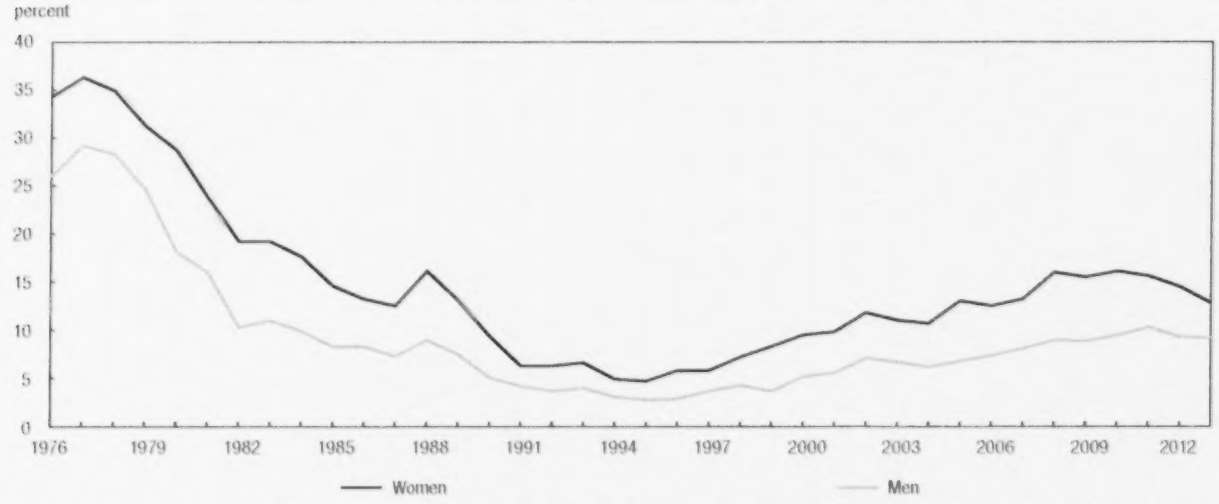
The prevalence of low income[39] among senior women, and senior men, followed a steep downward trend from the mid-1970s to the mid-1990s (Chart 14). During this time period, the low-income rate among senior women dropped from a high of 36.3% in 1977 to a low of 4.7% in 1995 (a difference of 31.6 percentage points, or 87%). This decline was in large part due to increases in income from pensions and government transfers.[40]

Since the mid-1990s, the prevalence of low income among seniors has risen somewhat, reflecting the fact that seniors' median income, a portion of which is indexed to inflation and not wage growth, has not grown at the same pace as that of non-seniors.[41] Specifically, from 1995 to 2013, the low-income rate increased by 8.1 percentage points among senior women and 6.4 percentage points among senior men. During the same period, the low income rate remained fairly stable among 18- to-64-year-olds, increasing by 1.1% among women and 1.4% among men (data not shown).

Although the low-income rate among senior women has increased since reaching a low point in the mid-1990s, it is worth noting that it declined by about 3% during the five-year period between 2008 and 2013. In contrast, the prevalence of low income among senior men did not change during this time period.

39. Analysis in this section uses the Low-income measure after tax (LIM-AT). LIM-AT is a relative measure of low income, set at 50% of adjusted median household income. The measure adjusts for the number of persons present in the household, reflecting the economies of scale inherent in household size. All household members are attributed the same income status.
40. Murphy, B., X. Zuang and C. Dionne. 2012. "Low Income in Canada: a Multi-line and Multi-index Perspective". *Income Research Paper Series*. Statistics Canada Catalogue no. 75F0002M.
41. Ibid.

Chart 14
Prevalence of low income after tax (LIM-AT)[1] among women and men aged 65 and over, Canada, 1976 to 2013



1. The Low-income measure after tax (LIM-AT) is a relative measure of low income, set at 50% of adjusted median household income. The measure adjusts for the number of persons present in the household, reflecting the economies of scale inherent in household size. All household members are attributed the same income status.
Source: Statistics Canada, Income Statistics Division, CANSIM table 206-0041.

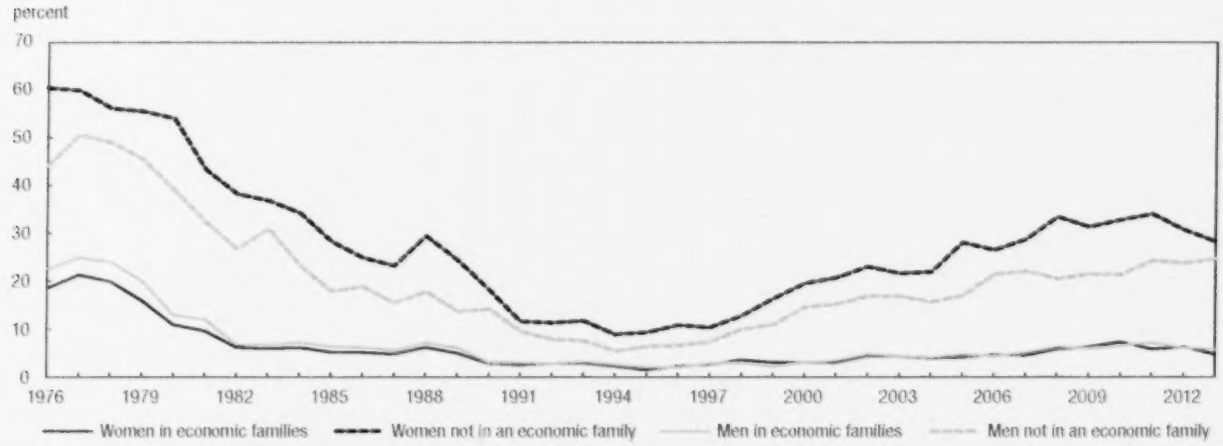
Prevalence of low income is lower among seniors in economic families

The prevalence of low income, according to the Low income measure after tax (LIM-AT), was lower among seniors living in an economic family than those who were not.[42] In 2013, 4.7% of senior women and 5.7% of senior men living with a spouse or other family member were in a low income situation (Chart 15). In contrast, 28.2% of senior women and 24.7% of senior men who were not in an economic family were in this situation.

Notably, senior women not living in an economic family were the most vulnerable to being in a low income situation. It is also among this group of seniors that the prevalence of low income has risen the most over the last two decades. The prevalence of low income among senior women who were not in an economic family increased by 18.9 percentage points between 1995 and 2015, from 9.3% to 28.2%. A similar increase was observed among senior men (18.3 percentage points). The increase was smaller among senior women (3.2 percentage points) and senior men (3.7 percentage points) living in economic families.

42. The term economic family refers to two or more persons living in the same household who are related to each other by blood, marriage, common-law, adoption, or a foster relationship. Persons not living in an economic family are persons living alone or with non-relatives only.

Chart 15
Prevalence of low income after tax (LIM-AT)[1] among women and men aged 65 and over, by economic family status[2], Canada, 1976 to 2013



1. The Low-income measure after tax (LIM-AT) is a relative measure of low income, set at 50% of adjusted median household income. The measure adjusts for the number of persons present in the household, reflecting the economies of scale inherent in household size. All household members are attributed the same income status.
2. An economic family refers to two or more persons living in the same household who are related to each other by blood, marriage, common-law, adoption or a foster relationship. Persons who are not in an economic family are persons who are living alone or with non-relatives only.
Source: Statistics Canada, Income Statistics Division, CANSIM table 206-0041.

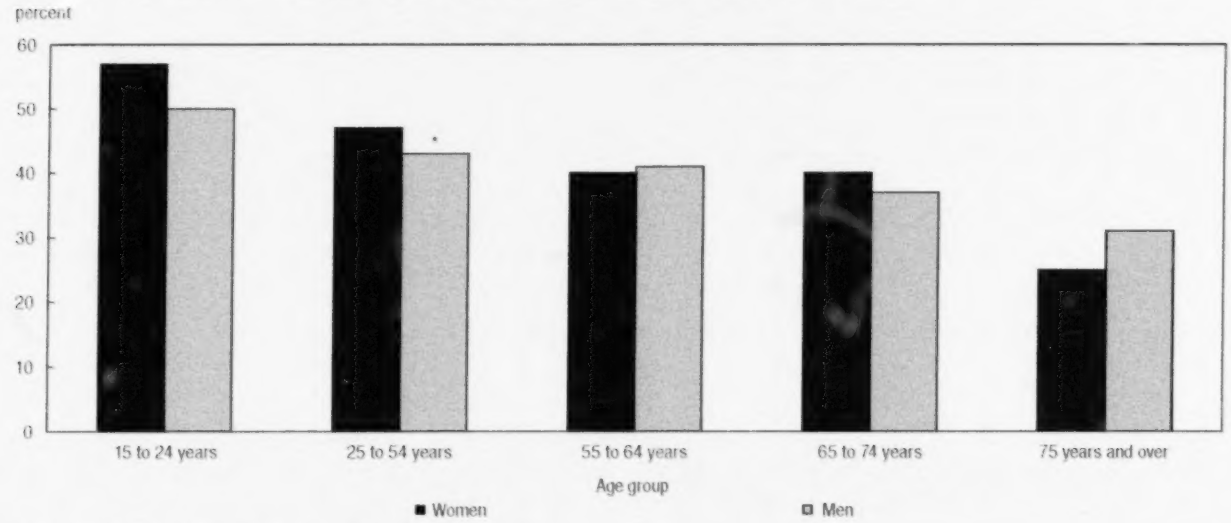
About one-third of senior women did volunteer work

Volunteering has been linked to a number of positive outcomes, including an increase in life satisfaction over time and positive changes in self-perceived health, particularly among older volunteers.[43] In other research, older volunteers who perceived their volunteer work as a contribution to others and to their community had higher scores on a measure of mental health. Those with lower socioeconomic status committed more time to volunteering, and perceived more personal benefits, such as an enlarged circle of friends and better self-esteem, than same-aged persons with higher socioeconomic status.[44]

In 2013, about one-third (33%) of senior women and senior men (34%) aged 65 and over reported that they had done volunteer work in the 12 months preceding the General Social Survey on Giving, Volunteering and Participating (data not shown). Participation in volunteer activities decreased with age. For example, volunteering was less common among senior women aged 75 and over (25%) than senior women aged 65 to 74 (40%) (Chart 16).

43. Van Willigen, M. 2000. "Differential Benefits of Volunteering Across the Life Course". *Journal of Gerontology: Social Sciences, Vol. 55B, no. 5.*
44. Tang, F., E. Choi and N. Morrow-Howell. 2010. "Organizational Support and Volunteering Benefits for Older Adults". *The Gerontologist, Vol. 50, no. 5.*

Chart 16
Women and men who did volunteer work in the past 12 months, by age group, Canada, 2013



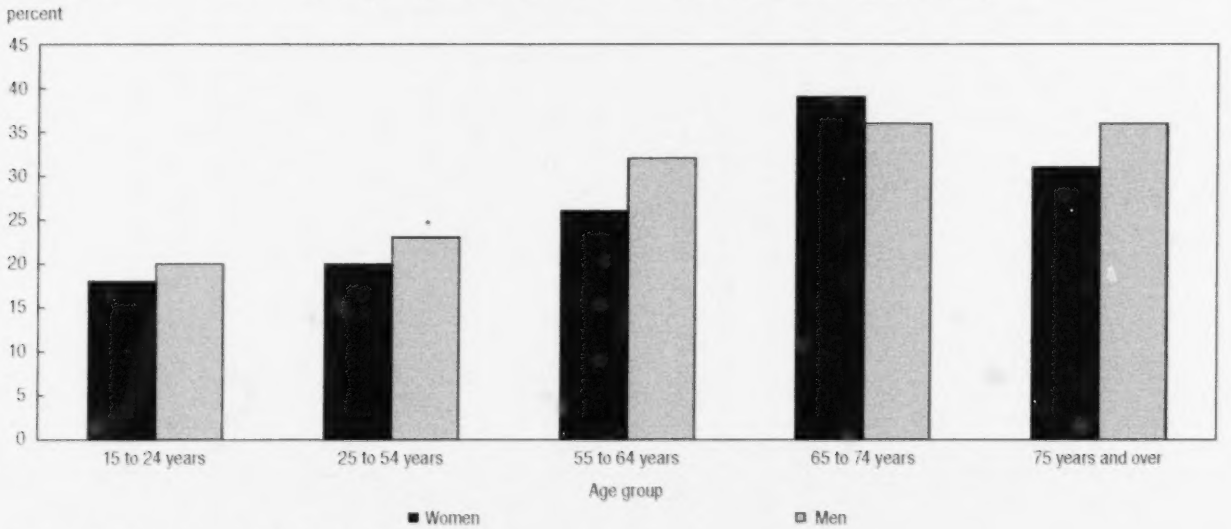
* significantly different from women, within age group, at $p < 0.05$
Source: Statistics Canada, General Social Survey on Giving, Volunteering and Participating, 2013.

Senior volunteers spend more time volunteering than younger volunteers

Although seniors were less likely than younger persons to volunteer, those who did so were more likely than their younger counterparts to volunteer for a large number of hours. In 2013, 37% of senior women and 36% of senior men who volunteered reported that they had volunteered 180 hours or more over the last year. Only 20% of women and 24% of men under the age of 65 had done so (data not shown).

Younger senior women (aged 65 to 74) were significantly more likely than older senior women (aged 75 and over) to have volunteered 180 hours or more over the last year (39% versus 31%) (Chart 17). Younger and older senior men were equally likely, however, to have put in a large number of volunteer hours (both 36%).

Chart 17
Volunteers who volunteered 180 hours or more in the past 12 months, by age group and sex, Canada, 2013



* significantly different from women, within age group, at $p < 0.05$
Source: Statistics Canada, General Social Survey on Giving, Volunteering and Participating, 2013.

Volunteer activities among seniors vary by sex

The two most frequently reported volunteer activities were the same for senior women and senior men. Namely, 43% of senior women and 44% of senior men who volunteered served on a committee or board, while 41% of senior women and 40% of senior men organized activities or events (Table 8). Fundraising was also a relatively common activity, reported by 36% of senior women and 32% of senior men who volunteered.

That said, senior women were more likely than senior men to report volunteer activities involving office work (27% versus 20%), or collecting, serving, or delivering goods (29% versus 23%). On the other hand, senior women were less likely than senior men to report that their volunteer activities included counselling or providing advice (22% versus 33%), maintenance, repair, or building work (7% versus 24%), volunteer driving (13% versus 19%), protecting the environment (11% versus 17%), or coaching, refereeing, or officiating (5%[E] versus 8%).

Table 8
Volunteer activities among seniors who volunteered in the last 12 months, by sex, Canada, 2013

	Total – 65 years and over		65 to 74 years		75 years and over	
	Women	Men	Women	Men	Women	Men
Volunteer activity	percentage					
Canvassing	9	12	10	12	7[!]	11[!]
Fundraising	36	32	37	34	35	27
Comittee or board	43	44	46	45	37	42
Teaching or mentoring	21	23	25	26	15	18[!]
Organizing activities or events	41	40	43	43	36	35
Office work	27	20*	30	25	23	12[!]*
Coaching, refereeing, or officiating	5[!]	8*	6[!]	11*	F	F
Counselling or providing advice	22	33*	24	35*	19	30*
Health care or support	22	22	22	21	23	24
Collecting, serving, or delivering goods	29	23*	28	23	32	24[!]
Maintenance, repair, or building	7	24*	8	28*	4[!]	17[!]*
Volunteer driving	13	19*	12	21*	14[!]	16[!]
Providing first aid, fire-fighting, or search and rescue	2[!]	3[!]	2E	5[!]	F	F
Protecting the environment	11	17*	12	21*	7[!]	11[!]
Other	28	24	29	25	27	22

[!] use with caution
F too unreliable to be published
* significantly different from women, within age group, at $p < 0.05$
Source: Statistics Canada, General Social Survey on Giving, Volunteering and Participating, 2013.

Senior women and men are equally likely to participate in organizations, but organization types differ by age group and sex

Like volunteering, participation in organizations and associations more broadly has also been positively associated with self-perceived health. It is also related to higher ratings on life satisfaction, and lower ratings on loneliness.[45] In 2013, the majority of senior women (62%) and senior men (61%) aged 65 and over living in private households reported that they had participated in at least one organization or association in the 12 months preceding the General Social Survey on Social Identity.

The top three organization and association types reported by senior women were seniors' groups (28%), cultural, educational or hobby organizations (25%), and religious groups (23%) (Table 9). However, participation in these types of activities varied significantly between younger (aged 65 to 74) and older (aged 75 and over) seniors. Participation in seniors' groups was more common among older seniors. About one-third of women aged 75 and over reported participating in a seniors' group within the last 12 months, compared with just under one-quarter of women aged 65 to 74. Similarly, older senior women were more likely to have participated in a religious organization, compared with younger senior women (26% versus 22%). In contrast, older senior women were less likely than their younger counterparts to have participated in a cultural, educational, or hobby organization (22% versus 28%).

The top three organization and association types reported by senior men were somewhat different than those of senior women. These were sports or recreational organizations (23%), followed by cultural, educational, or hobby organizations (19%) and seniors' groups (18%).

45. Gilmour, H. 2012. "Social participation and the health and well-being of Canadian seniors", *Health Reports, Vol. 23, no. 4*. Statistics Canada Catalogue no. 82-003-X.

Table 9
Proportion of the population aged 65 and over who participated in selected types of organizations and associations, Canada, 2013

	Total – 65 years and over		65 to 74 years		75 years and over	
	Women	Men	Women	Men	Women	Men
Organization or association type	percentage					
Union or professional organization	9	17*	11	21*	6	12*
Political party or group	6	8*	6	8*	5	8*
Sports or recreational organization	19	23*	23	25	14	19*
Cultural, educational, or hobby organization	25	19*	28	20*	22	17*
Religious group	23	16*	22	17*	26	16*
School or community group	13	12	15	13	10	11
Service club	9	15*	9	14*	8	16*
Seniors' group	28	18*	23	14*	33	24*
Immigrant or ethnic association or club	3	3	3[E]	3[E]	2[E]	3[E]

[E] use with caution

* significantly different from women, within age group, at $p < 0.05$

Source: Statistics Canada, General Social Survey on Social Identity, 2013.

Social networks become smaller with age

Previous research has shown a positive relationship between social connectedness and self-reported life satisfaction among adults of all ages.[46] Among seniors, connections to family, friends, and acquaintances may be particularly useful, if not critical, in meeting their needs for care associated with aging.

Close ties to family members and friends, for example, are likely sources of emotional support and help with daily activities.[47] On the other hand, weaker ties, such as to acquaintances, can be valuable sources of information, and have been shown to be a useful bridge to formal community services.[48] Notably, support from family, friends and acquaintances has been shown to be related to more positive health outcomes, including a lower incidence of certain chronic conditions and better self-reported health.[49,50]

Despite the importance of social connections to seniors' health and care, data from the 2013 General Social Survey show that seniors' social networks decrease in size with age. While 3% of women aged 65 to 74 reported having no close family members[51], the proportion of women aged 75 and over who reported this was twice as high (6%) (Table 10). Similarly, the proportions of senior women aged 65 to 74 who reported having no close friends (9%) or acquaintances (11%) were lower than for older senior women (13% and 17%).

Although older senior women were more likely than women aged 65 to 74 to report not having any close friends, both groups were similarly likely to report having daily in-person contact with family members living outside their household (9% versus 10%). On the other hand, older senior women were more likely than women aged 65 to 74 to report having daily in-person contact with friends (14% versus 9%).

Notably, there was a small but statistically significant difference in the proportions of men and women aged 65 and over who reported not having any close friends. Senior men were slightly less likely than senior women to report this (6% versus 5%). Similarly, senior men were less likely than senior women to report having daily in-person contact with a family member (8% versus 10%).

Whether they interacted in person, by telephone, or using other means of communication, the vast majority of senior women and men reported being satisfied or very satisfied with the amount of contact they had with family and friends. Over 9 in 10 senior women and men aged 65 and over reported being satisfied or very satisfied with the amount of contact they had with family (92% and 91%) (data not shown).[52] Senior women (94%) were slightly more likely than senior men (91%) to report being satisfied or very satisfied with the amount of contact they had with friends.

46. Sinha, M. 2014. "Canadians' connections with family and friends". *Spotlight on Canadians: Results from the General Social Survey, no. 006*. Statistics Canada Catalogue no. 89-652-X.
47. Keating, N. and D. Dosman. 2009. "Social Capital and the Care Networks of Frail Seniors". *Canadian Review of Sociology, 46.4*.
48. Ibid.
49. Tomaka, J., S. Thompson and R. Palacios. 2006. "The Relation of Social Isolation, Loneliness, and Social Support to Disease Outcomes Among the Elderly." *Journal of Aging and Health, Vol. 18, no. 3*.
50. Sinha, M. 2014. "Canadians' connections with family and friends." *Spotlight on Canadians: Results from the General Social Survey, no. 006*. Statistics Canada Catalogue no. 89-652-X.
51. Close family members refer to family members that the respondent feels at ease with, can talk to about what is on their mind, or can call on for help.
52. Only respondents who indicated that they had at least one close family member were asked to rate their level of satisfaction with contact with family members. Similarly, only respondents with at least one close friend were asked to rate their level of satisfaction with contact with friends.

Table 10
Characteristics of seniors' social networks, by age group and sex, Canada, 2013

Characteristic	Women			Men		
	Total – 65 years and over	65 to 74 years	75 years and over	Total – 65 years and over	65 to 74 years	75 years and over
	percentage					
Number of family members respondent feels close to						
None	5	3	6†	6*	6*	6
One to four	44	44	44	48*	46	51*†
Five or more	52	53	50	46*	48*	43*†
Number of friends respondent feels close to						
None	11	9	13†	13*	11	17*†
One to four	45	47	42†	43	46	40†
Five or more	44	44	44	43	43	43
Number of friends excluding closest (i.e., acquaintances)						
None	13	11	17†	14	11	18†
One to four	13	13	14	13	13	13
Five or more	73	76	70†	73	76	69†
Daily in-person contact						
With family[1]	10	9	10	8*	8	8
With friends	11	9	14†	11	10	12

* significantly different from women, within age group, at $p < 0.05$
† significantly different from 65- to-74-year-olds, within sex, at $p < 0.05$
1. Excludes family members living with the respondent.
Source: Statistics Canada, General Social Survey on Social Identity, 2013.

Seniors living in couples have larger social networks than seniors living alone

Senior women aged 65 and over living in couples were more likely than senior women living alone to report having a large number (5 or more) of close family members (58% compared with 46%) (Table 11). Senior women living in couples were also more likely to report having a large number of acquaintances, compared with their counterparts living alone (78% versus 72%, respectively). That said, the number of friends reported by senior women did not differ based on whether they lived alone or as part of a couple.

Similar patterns with respect to family and acquaintance networks were observed for senior men living in couples and living alone. However, senior men living in couples were more likely than those living alone to report having a large number of close friends (45% versus 36%).

Table 11
Characteristics of social networks among persons aged 65 and over, by living arrangement and sex, Canada, 2013

Characteristic	Women		Men	
	Living alone	Living in a couple[2]	Living alone	Living in a couple[2]
	percentage			
Number of family members respondent feels close to				
None	7	2†*	11	5*
One to four	47	40*	59	45*
Five or more	46	58*	30	50*
Number of friends respondent feels close to				
None	11	10	18	12*
One to four	43	45	46	43
Five or more	46	45	36	45*
Number of friends excluding closest (i.e., acquaintances)				
None	15	10*	21	12*
One to four	14	12	15	12
Five or more	72	78*	64	76*
Daily in-person contact				
With family[1]	12	7*	9	7
With friends	17	7*	20	8*

† use with caution
* significantly different from persons living alone, within sex, at $p < 0.05$
1. Excludes family members living with the respondent.
2. Includes opposite- and same-sex married and common-law couples.
Source: Statistics Canada, General Social Survey on Social Identity, 2013.

The majority of senior women and men used the Internet in the last year

The Internet offers users the opportunity to communicate with others, to find information, and to engage in consumer and recreational activities. For seniors, engaging in online activities such as these may help maintain a sense of independence. In fact, past research has shown a positive relationship between Internet use and the perception of self-efficacy among adults aged 60 and over.[53] These findings are subject to interpretation. It could be that people who perceive themselves as self-efficacious, who have the belief that they are capable of succeeding at a variety of tasks, are more likely to use the Internet. On the other hand, it could be that using the Internet promotes feelings of self-efficacy. While further research on this topic is required, some encouraging results have shown that seniors who were trained to use the Internet scored higher on measures of life satisfaction and perceived self-control and lower on measures of depression and loneliness four months post-training, compared with seniors who were engaged in other activities.[54]

In the 2013 General Social Survey on Social Identity, the majority of senior women (54%) and senior men (59%) living in private households reported having used the Internet in the past 12 months. Internet use was more commonly reported by younger seniors (aged 65 to 74 years) than older seniors (aged 75 years old and over). For example, while Internet use was reported by nearly 7 in 10 (69%) younger senior women, fewer than 4 in 10 older senior women (35%) did so.

While a similar proportion of women and men aged 65 to 74 reported having used the Internet in the last 12 months (69% compared with 70%), older senior women were less likely than older senior men to have done so (35% versus 41%).

Nearly 4 in 10 senior women who used the Internet had a social media account

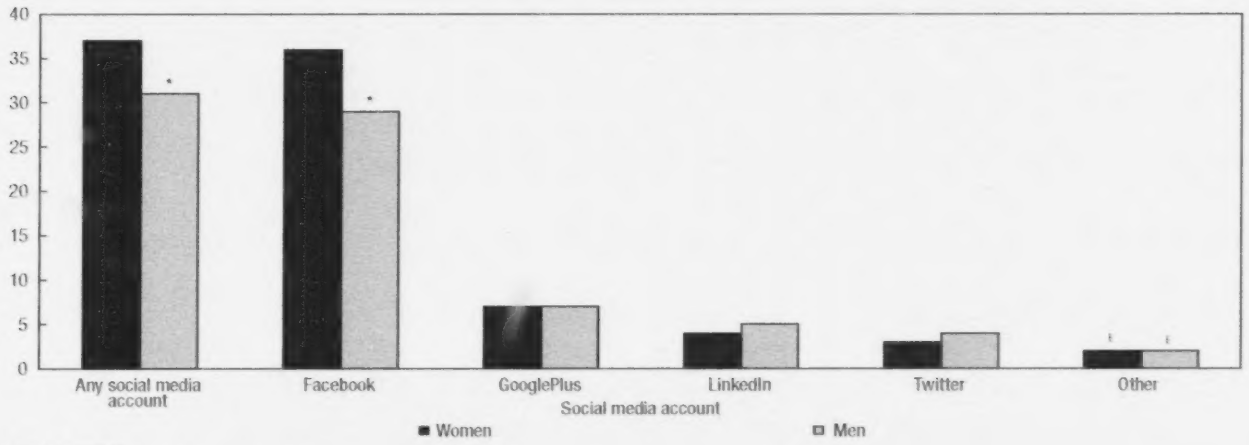
In 2013, 37% of senior women who had used the Internet in the last 12 months reported having at least one social media account (Chart 18).[55] A smaller proportion (31%) of senior men did so.

Having a social media account was more common among younger seniors than older seniors. For example, 42% of women aged 65 to 74 had at least one social media account, compared with 25% of women aged 75 and over.

The most commonly held social media account among senior women and men was Facebook. This type of account was reported by 36% of senior women and 29% of senior men who had used the Internet within the last 12 months. The second most frequently reported social media account was GooglePlus, held by about 7% of senior women and men who had used the Internet in the same time frame.

53. Erickson, J., and G.M. Johnson. 2011. "Internet Use and Psychological Wellness during Late Adulthood." *Canadian Journal on Aging, 30.*
54. Shapira, N., A. Barak and I. Gal. 2007. "Promoting older adults' well-being through Internet training and use." *Aging and Mental Health, Vol. 11, no. 5.*
55. Internet users were only asked about social media accounts if they had visited at least one social media site in the last year. The proportion of senior women (39%) and senior men (33%) who visited a social media site within the last year was similar to the proportion of senior women (37%) and senior men (31%) who had at least one social media account. It is possible that some respondents with social media accounts were excluded from the proportion having such an account because they did not visit a social media website in the last year.

Chart 18
Population of Internet users[1] aged 65 and over with selected social media accounts,[2] by sex, Canada, 2013



E use with caution
* significantly different from women at $p < 0.05$
1. Internet users are respondents who used the Internet within the last 12 months.
2. Internet users were only asked about social media accounts if they had visited at least one social media website in the last 12 months.
Source: Statistics Canada, General Social Survey on Social Identity, 2013.

Senior women are less likely than senior men to use the Internet for consumer activities

The General Social Survey asked Internet users[56] whether they engaged in several types of consumer activities online within the last month. In general, senior women were less likely than senior men to engage in these types of activities.

For example, while 45% of female Internet users aged 65 and over reported that they had done electronic banking within the last month, this type of Internet use was reported by 54% of their male counterparts (Table 12). Similarly, 68% of senior women searched for information on goods or services, compared with 76% of senior men. A smaller proportion of seniors made an online purchase within the last month, and senior women were less likely than senior men to have done so (18% versus 25%).

Notably, for both men and women, using the Internet for consumer activities was more common among younger seniors (aged 65 to 74) than older seniors (aged 75 and over).

Table 12
Proportion of Internet users[1] aged 65 and older who performed selected activities within the last month, by age group and sex, Canada 2013

	Total – 65 years and over		65 to 74 years		75 years and over	
	Women	Men	Women	Men	Women	Men
Internet activity	percentage					
Electronic banking	45	54*	50	57*	34	44*
Searched for information on goods or services	68	76*	73	79*	56	67*
Purchased goods or services	18	25*	21	29*	9	14

* significantly different from women, within age group, at $p < 0.05$
1. Internet users are respondents who used the Internet within the last 12 months.
Source: Statistics Canada, General Social Survey on Social Identity, 2013.

Most senior women and men rate their general and mental health in positive terms

Nearly 8 in 10 women (78.8%) aged 65 and over living in private households rated their health in positive terms in the 2013–2014 Canadian Community Health Survey (Table 13).[57] About the same proportion (78.6%) of senior men rated their general health as "good", "very good", or "excellent" at that time. In fact, senior women and men tended to rate their general health similarly across several age groups. However, senior women aged 65 to 74 were more likely than same-aged men to rate their health in positive terms (83.0% versus 81.0%).

56. Internet users are respondents who had used the Internet within the last 12 months.
57. This section provides a general overview of seniors' health. For more information on senior women's health, see T. Bushnik, 2016. "The health of women and girls in Canada." *Women in Canada 7th Edition*. Statistics Canada Catalogue no. 89-503-X.

The proportion of women and men who provided positive ratings of their general health decreased with age. However, a strong majority of women (69.0%) and men (67.9%) aged 85 and over rated their general health positively nonetheless.

Table 13
Self-reported health of senior women and men, by age group, Canada, 2013–2014

	Total – 65 years and over		65 to 74 years		75 to 84 years		85 years and over	
	Women	Men	Women	Men	Women	Men	Women	Men
Self-reported general health rating	percentage							
Positive[1]	**78.8**	**78.6**	**83.0**	**81.0***	**74.3**	**76.2**	**69.0**	**67.9**
Excellent	15.1	14.3	17.8	15.7*	12.4	12.8	8.5	8.9
Very good	30.5	30.4	32.1	32.1	29.4	28.2	25.1	25.3
Good	33.1	33.9	33.1	33.2	32.5	35.2*	35.4	33.7
Negative[2]	**21.2**	**21.4**	**17.0**	**19.0***	**25.7**	**23.8**	**31.0**	**32.1**
Fair	15.5	15.6	12.8	14.0	18.0	16.9	22.8	22.7
Poor	5.7	5.9	4.2	4.9	7.7	6.9	8.2	9.4
Total[3]	**100.0**	**100.0**	**100.0**	**100.0**	**100.0**	**100.0**	**100.0**	**100.0**

* significantly different from women, within age group, at $p < 0.05$
1. Positive includes general health ratings of "excellent", "very good" and "good".
2. Negative includes general health ratings of "fair" and "poor".
3. Total is the sum of positive and negative health ratings.
Source: Statistics Canada, Canadian Community Health Survey, 2013–2014.

A large majority of senior women and men (both 94.3%) living in private households rated their mental health in positive terms in the 2013–2014 Canadian Community Health Survey (Table 14). While positive ratings among seniors decreased overall with age, there was a more noticeable decline in ratings of "excellent" mental health. For example, while 35.6% of women aged 65 to 74 rated their mental health as "excellent", only 24.4% of women aged 85 and over did so. A similar decline was observed among men.

Table 14
Self-reported mental health of senior women and men, by age group, Canada, 2013–2014

	Total – 65 years and over		65 to 74 years		75 to 84 years		85 years and over	
	Women	Men	Women	Men	Women	Men	Women	Men
Self-reported mental health rating	percentage							
Positive[1]	**94.3**	**94.3**	**95.1**	**94.7**	**93.1**	**94.5**	**93.9**	**90.0***
Excellent	32.7	34.4*	35.6	37.2	29.7	30.4	24.4	24.8
Very good	35.6	34.6	35.3	35.4	36.1	34.1	35.8	28.8*
Good	26.0	25.3	24.2	22.1	27.3	30.0	33.6	36.3
Negative[2]	**5.7**	**5.7**	**4.9**	**5.3**	**6.9**	**5.5**	**6.1**	**10.0***
Fair	4.9	5.0	4.3	4.5	5.7	5.0	5.7	9.0*
Poor	0.8	0.7	0.6	0.7[!]	1.2[!]	0.5[!]	F	F
Total[3]	**100.0**	**100.0**	**100.0**	**100.0**	**100.0**	**100.0**	**100.0**	**100.0**

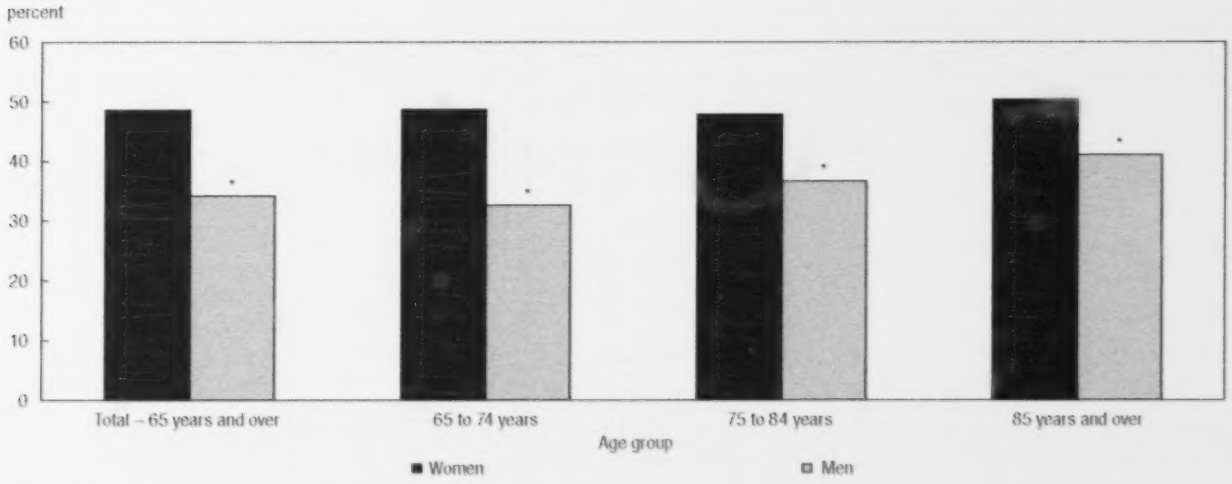
[!] use with caution
F too unreliable to be published
* significantly different from women, within age group, at $p < 0.05$
1. Positive includes mental health ratings of "excellent", "very good" and "good".
2. Negative includes mental health ratings of "fair" and "poor".
3. Total is the sum of positive and negative mental health ratings.
Source: Statistics Canada, Canadian Community Health Survey, 2013–2014.

About half of senior women consume fruits and vegetables at least five times daily

Fruit and vegetable consumption is a good indicator of overall diet quality.[58] About half of senior women (48.6%) in the 2013–2014 Canadian Community Health Survey reported that they consumed fruits and vegetables five or more times per day, compared with about one-third (34.2%) of senior men (Chart 19). Fruit and vegetable consumption remained stable beyond the age of 65 among senior women, but increased with age among senior men. While 32.6% of senior men aged 65 to 74 reported eating fruits and vegetables five or more times per day, among senior men aged 75 to 84 and 85 and over, the proportions were 36.7% and 41.1%.

58. Garriguet, D. 2009. "Diet quality in Canada." *Health Reports*, Vol. 20, no. 3. Statistics Canada Catalogue no. 82-003-X.

Chart 19
Women and men aged 65 and over who consumed fruits and vegetables five or more times per day, by age group, Canada, 2013—2014



* significantly different from women, within age group, at $p < 0.05$
Source: Statistics Canada, Canadian Community Health Survey, 2013—2014.

Senior women are less likely to smoke or to have smoked tobacco compared with senior men

Senior women were less likely than senior men to be current smokers or to have smoked in their lifetime. In the 2013–2014 Canadian Community Health Survey, 8.8% of women aged 65 and over reported smoking currently, either regularly or occasionally, compared with 10.8% of same-aged men (Table 15). Senior women were also less likely than their male counterparts to have ever smoked in their lifetime (54.2% versus 77.3%).

Older senior women were less likely than younger senior women to be current smokers, or to have smoked in their lifetime. For example, 3.0%[E] of women aged 85 and over reported being current smokers, compared with 11.1% of women aged 65 to 74. Similarly, while 39.4% of women aged 85 and over had smoked in their lifetime, this was reported by 58.4% of women aged 65 to 74.

Like women, older senior men were less likely than younger senior men to be smokers. However, older senior men were not statistically less likely than younger senior men to have smoked in their lifetime.

Table 15
Current and past smoking among senior women and men, by age group, Canada, 2013–2014

	Total – 65 years and over		65 to 74 years		75 to 84 years		85 years and over	
	Women	Men	Women	Men	Women	Men	Women	Men
Smoking behaviour	percentage							
Current smoking behaviour								
Smokes regularly or occasionally	8.8	10.8*	11.1	12.7*	6.5	8.7*	3.0[E]	2.3[E]
Does not currently smoke	91.2	89.2*	88.9	87.3*	93.5	91.3*	97.0	97.7
Has ever smoked								
Yes	54.2	77.3*	58.4	78.4*	51.4	75.7*	39.4	74.6*
No	45.8	22.7*	41.6	21.6*	48.6	24.3*	60.6	25.4*

[E] use with caution
* significantly different from women, within age group, at $p < 0.05$
Source: Statistics Canada, Canadian Community Health Survey, 2013–2014.

Less than half of senior women are physically active

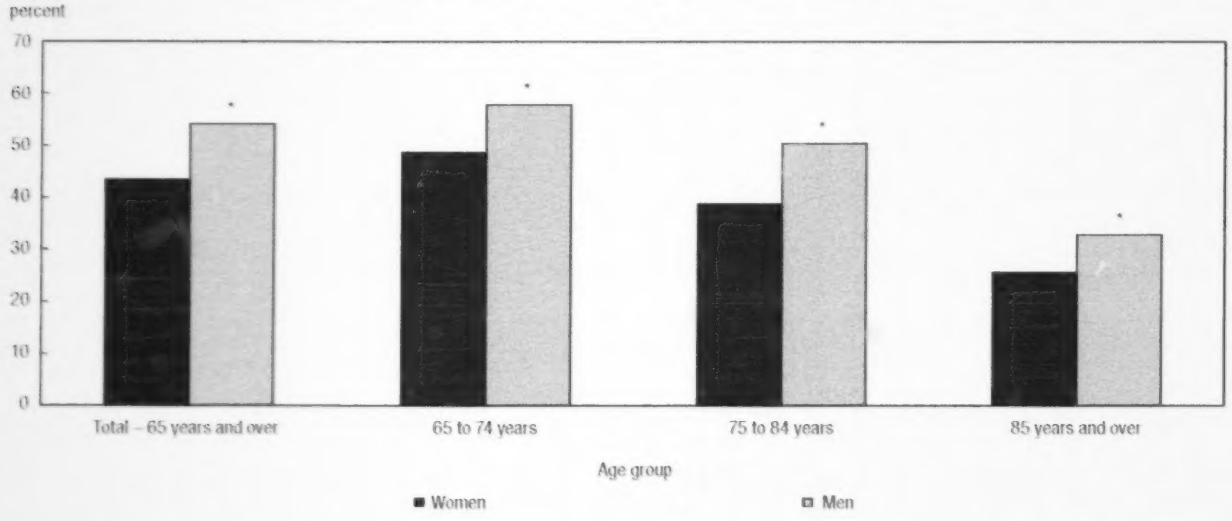
The Canadian Community Health Survey categorizes respondents into three categories (active, moderately active, or inactive), based on their average daily energy expenditure[59] during leisure and transportation activities in the three months preceding the survey.

59. Energy expenditure is calculated using the frequency and duration per session of the physical activity as well as the energy cost of the activity (kilocalories expended per kilogram of body weight per hour of activity).

Less than half (43.5%) of senior women aged 65 and over were categorized as active or moderately active in the 2013–2014 Canadian Community Health Survey (Chart 20). The proportion of senior women who were active or moderately active declined with age. While 48.7% of women aged 65 to 74 were active or moderately active, the proportion dropped to 25.6% for women aged 85 and over.

The proportion of senior men who were active or moderately active also decreased with age. However, senior men were more likely than senior women to be active or moderately active. Among seniors aged 65 and over, 54.1% of men, compared with 43.5% of women, were active or moderately active. This difference was also observed within smaller age groupings. For example, almost one-third of men aged 85 and over were active or moderately active, compared with approximately one-quarter of same-aged women.

Chart 20
Seniors who are active or moderately active, by age group and sex, Canada, 2013—2014



* significantly different from women, within age group, at $p < 0.05$
Source: Statistics Canada, Canadian Community Health Survey, 2013—2014.

More than 8 in 10 senior women and men have at least one chronic health condition

In 2013–2014, 84.4% of senior women living in private households had at least one chronic health condition, that is, a condition that has lasted or is expected to last six months or more and that has been diagnosed by a health professional (Table 16).[60] The likelihood of having at least one chronic condition increased with age. While 80.9% of women aged 65 to 74 had at least one chronic health condition, the proportion for women aged 85 and over was 91.0%.

Overall, a smaller proportion (82.2%) of senior men than senior women had at least one chronic health condition. However, this gender difference was only statistically significant among 75 to 84 year olds.

60. This statistic refers to the proportion of women aged 65 and over who were diagnosed with one of the 17 chronic health conditions for which data were collected in the 2013–2014 Canadian Community Health Survey. These conditions are listed in Table 16. There are other types of conditions for which data were not collected in the 2013–2014 Canadian Community Health Survey.

Table 16
Chronic health conditions among senior women and men, by age group, Canada, 2013–2014

Chronic health condition[1]	Total – 65 years and over		65 to 74 years		75 to 84 years		85 years and over	
	Women	Men	Women	Men	Women	Men	Women	Men
	percentage							
At least one chronic health condition[2]	**84.4**	**82.2***	**80.9**	**79.4**	**88.7**	**86.4***	**91.0**	**88.4**
High blood pressure	48.4	46.5*	44.6	44.7	53.5	50.6*	55.0	45.4*
Arthritis	48.2	33.0*	44.0	29.8*	53.3	37.8*	55.8	40.3*
Back problems	25.9	24.2*	24.8	24.0	27.3	24.9	27.7	22.2*
Diabetes	15.5	20.6*	14.4	20.6*	17.4	22.0*	15.6	15.1
Heart disease	13.7	20.1*	9.3	16.7*	17.3	24.9*	26.8	28.8
Urinary incontinence	13.6	9.1*	9.9	6.3*	15.4	12.8*	28.1	18.1*
Asthma	8.8	6.4*	8.9	6.6*	9.1	6.2*	7.4	5.7
Bowel disorder	7.9	3.4*	7.6	3.3*	8.5	3.6*	7.9	3.4[t]*
Chronic obstructive pulmonary disease	7.7	7.1	6.6	6.2	9.5	8.6	8.0	8.8
Mood disorder	7.5	5.0*	8.3	5.5*	6.8	4.0*	5.5	5.1
Migraine	6.3	2.8*	7.5	3.2*	4.9	2.0*	4.1[t]	2.6[t]
Anxiety disorder	6.0	3.5*	6.7	3.9*	5.1	3.0*	5.1	2.3[t]*
Cancer	4.8	6.6*	4.1	5.3*	6.1	7.9*	5.0	12.2*
Scoliosis	4.2	1.7*	4.5	1.5*	3.8	2.1*	4.0	F
Ulcer	3.8	2.9*	3.8	2.8*	4.1	3.0	3.0	2.6
Effects of stroke	3.3	4.0*	2.1	3.2*	4.4	5.0	7.3	6.9
Alzheimer's disease or other dementia	2.2	2.3	0.6E	0.8[t]	3.2	4.1	8.2	7.0

[t] use with caution
F too unreliable to be published
* significantly different from women, within age group, at $p < 0.05$
1. Chronic health condition refers to health problems that are reported by the respondent, that have been diagnosed by a health professional, and that are expected to last 6 months or more.
2. At least one chronic condition from those listed below. There are other chronic conditions for which data were not collected in the 2013–2014 Canadian Community Health Survey.
Source: Statistics Canada, Canadian Community Health Survey, 2013–2014.

High blood pressure is the most common chronic health condition among senior women

The most common chronic health condition among senior women was high blood pressure, reported by nearly half (48.4%) of women aged 65 and over (Table 16). High blood pressure was also the most common chronic health condition reported by senior men (46.5%).

Arthritis was the second most commonly reported chronic health condition among senior women, affecting 48.2% of those aged 65 and over. Although arthritis was reported by a smaller proportion of senior men (33.0%) than senior women, it was nonetheless the second most common chronic health condition among senior men.

Diabetes and heart disease were also among the most frequently reported chronic health conditions for senior women, reported by 15.5% and 13.7% of women aged 65 and over. These conditions were, however, significantly more common among senior men. Approximately 1 in 5 senior men reported having diabetes (20.6%) or heart disease (20.1%). In contrast, urinary incontinence was more common among senior women (13.6%) than senior men (9.1%), and was the third most commonly reported chronic condition among women aged 85 and over.

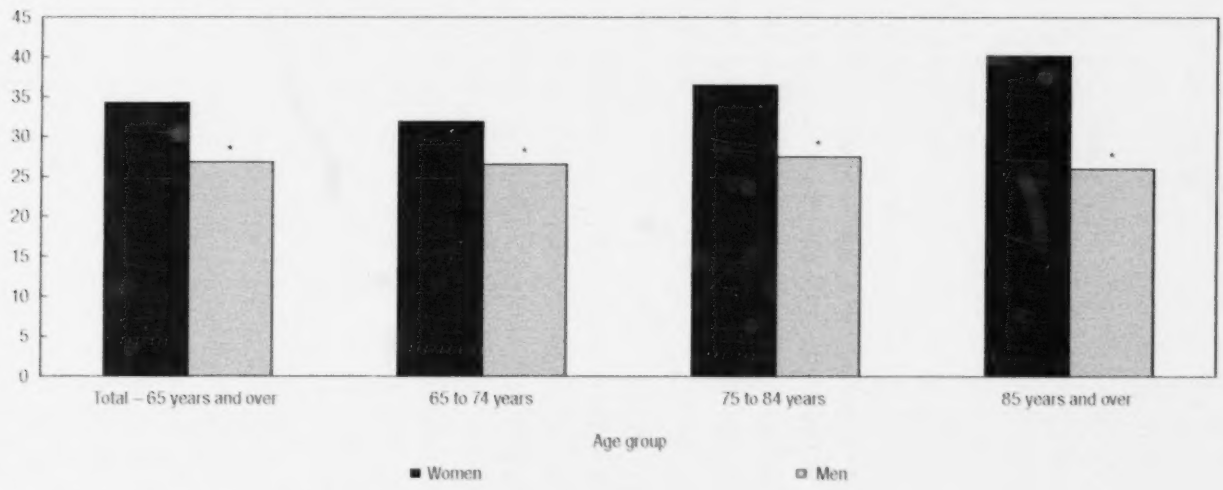
Although mood and anxiety disorders were not as frequently reported as other chronic health conditions, it is worth noting that they were more frequently reported among senior women than senior men. While 7.5% of senior women reported having a mood disorder, the proportion of senior men who reported having such a condition was 5.0%. Similarly, anxiety disorders were reported by 6.0% of senior women, compared with 3.5% of senior men.

Senior women report that they are "usually in pain" more commonly than senior men

In the 2013–2014 Canadian Community Health Survey, more than one-third (34.2%) of women aged 65 and over reported usually being in pain (Chart 21). This compares with approximately one-quarter (26.8%) of same-aged men.

The proportion of women who reported usually being in pain increased with age. For example, 31.9% of women aged 65 to 74 indicated being usually in pain, compared with 40.2% of women aged 85 and over. In contrast, the proportion of senior men who reported this remained relatively stable across these age groups.

Chart 21
Seniors who reported being usually in pain, by age group and sex, Canada, 2013—2014



* significantly different from women, within age group, at $p < 0.05$
Source: Statistics Canada, Canadian Community Health Survey, 2013—2014.

Disability becomes more common with age

When a long-term physical or mental condition limits a person's daily activities, it is considered a disability. In 2012, over one-third (35.3%) of women aged 65 and over living in private households reported having at least one disability (Table 17). The prevalence of disability increased with age. For example, 27.6% of women aged 65 to 74 reported having at least one disability, compared with 59.2% of women aged 85 and over.

Overall, men aged 65 and over were less likely than same-aged women to report having a disability (30.9%). However, this difference was only statistically significant among 65- to-74-year-olds. Within this age group, 25.0% of men and 27.6% of women reported having a disability.

Table 17
Prevalence of disability among senior women and men, by age group, Canada, 2012

	Total – 65 years and over		65 to 74 years		75 to 84 years		85 years and over	
	Women	Men	Women	Men	Women	Men	Women	Men
Disability[1]	percentage							
At least one disability	**35.3**	**30.9***	**27.6**	**25.0***	**40.8**	**37.6**	**59.2**	**53.1**
Hearing	9.1	12.1*	5.9	8.9*	9.9	15.2*	24.1	26.4
Seeing	7.2	5.8*	5.1	3.7*	7.8	7.8	17.5	15.4[!]
Mobility	22.5	18.3*	17.4	13.7*	24.5	23.7	43.7	35.5
Flexibility	20.7	17.6*	16.1	13.7*	23.7	21.3	36.2	35.7
Dexterity	10.3	6.8*	7.3	5.0*	12.0	8.3*	21.3	17.2[!]
Pain	24.8	19.1*	20.3	16.1*	27.7	22.4*	40.4	31.0*
Learning	2.9	3.3	2.2[!]	2.0	3.0[!]	5.0[!]*	6.4[!]	6.0[!]
Developmental	F	0.5[!]	F	0.2[!]	F	F	F	F
Mental / psychological	5.2	4.4	4.7	3.9	4.7	4.7[!]	9.3[!]	F
Memory	5.0	5.1	3.0	3.4	5.6[!]	6.9	14.2	12.6[!]
Other	0.8[!]	0.7[!]	0.4[!]	0.8[!]	F	F	F	F

[!] use with caution
F too unreliable to be published
* significantly different from women, within age group, at $p < 0.05$
1. A disability is the result of a long-term physical or mental condition that limits a person's daily activities.
Source: Statistics Canada, Canadian Survey on Disability, 2012.

Pain is the most commonly reported disability among seniors, and more prevalent among women

Pain was the most commonly reported disability among women aged 65 and over, reported by nearly one-quarter (24.8%) of these women (Table 17). Difficulties with mobility (22.5%) and flexibility (20.7%) were the second and third most commonly reported disabilities among women aged 65 and over. The prevalence of these types of disabilities also increased substantially with age. For example, the prevalence of mobility issues among women aged 85 and over was more than twice (43.7%) that of women aged 65 to 74 (17.4%). Indeed, in the 85 and over age group, mobility issues were the most commonly reported disability among senior women.

Although difficulties with memory were reported by a smaller proportion of senior women compared with other disabilities, the prevalence of this type of disability was almost five times higher among women aged 85 than among women aged 65 to 74 (14.2% versus 3.0%).

While the disabilities most commonly reported by senior men were similar overall to those reported by senior women, they were reported less frequently. Disabling pain was reported by 19.1% of senior men, followed by problems with mobility (18.3%) and flexibility (17.6%). Although mobility and flexibility disabilities were less prevalent overall among senior men than senior women, this was due to the fact that, on average, senior women are older than senior men. Between senior women and men, there was no significant difference in the prevalence of these disabilities beyond 75 years of age. In contrast, senior women in every age group were more likely than senior men to report a pain disability.

On the other hand, senior men (12.1%) were more likely than senior women (9.1%) to report a hearing disability. This gender difference was statistically significant among 65- to-74-year-olds and 75- to-84–year-olds, but not among seniors aged 85 and over.

More than half of senior women aged 85 and over receive help with daily activities

Difficulties related to aging, such as the development of chronic health conditions as well as physical and mental disabilities, may make certain daily tasks challenging. As such, as seniors get older, they are more likely to report receiving help with daily activities, such as household chores, personal care and finances.

Paid help, sometimes referred to as formal help or formal care, is provided by paid professionals. Paid help includes services provided by professionals, such as social workers, house cleaners and doctors among many others. In some cases, the users of these services do not incur a direct cost (e.g., physician services), while in others, the user must pay a portion of the cost (e.g., an insurance co-payment), or the entire cost. On the other hand, unpaid help, sometimes referred to as informal help or informal care, is usually provided by family, friends, or neighbours.[61]

In 2012, about 20% of women aged 65 and over living in private households received help (either paid or unpaid) with daily activities (Table 18). This proportion grew with age. Compared with the 11% of women aged 65 to 74 who reported receiving such help, 51% of women aged 85 and over did so. The same pattern was observed among senior men, even though senior men were generally less likely than senior women to report having received help.

Unpaid help was more commonly received than paid help by both senior women and senior men. Among senior women aged 65 and over, 18% reported receiving unpaid help. In comparison, 12% of same-aged women received paid help. Nearly half (48%) of women aged 85 and over reported receiving unpaid help and over one-third (34%) reported receiving paid help.

Table 18
Seniors who received paid or unpaid help in the last 12 months, by age group and sex, Canada, 2012

	Total – 65 years and over		65 to 74 years		75 to 84 years		85 years and over	
	Women	Men	Women	Men	Women	Men	Women	Men
Type of help received	percentage							
Paid or unpaid	**20**	**14***	**11**	**9***	**23**	**19**	**51**	**34***
Unpaid	18	13*	10	8*	20	17	48	30*
Paid	12	8*	6	5	13	9*	34	23*

* significantly different from women, within age group, at $p < 0.05$

Source: Statistics Canada, General Social Survey on Caregiving and Care Receiving, 2012.

61. This section focuses on seniors as recipients of help with daily activities. For information on the consequences of providing help from the caregiver's perspective, see M. Turcotte, 2013, "Family caregiving: What are the consequences?" *Insights on Canadian Society*, Statistics Canada Catalogue no. 75-006-X.

Primary caregiver differs between senior women and senior men

In 2012, senior women were more likely than senior men to report a daughter as their primary caregiver, but less likely to report a spouse as their primary caregiver. For example, 42% of women aged 65 and over, compared with 15% of their male counterparts, reported their daughter as their primary caregiver (Table 19). However, only 19% of senior women, compared with 60% of senior men, reported their spouse as their primary caregiver.

These findings can at least partly be explained by gender differences in life expectancy and living arrangements. Women have longer life expectancy than men and are more likely to live alone in their senior years. This explanation is supported by the primary caregiver patterns reported by both senior women and men from different age groups.

Table 19
Primary caregiver of seniors who received unpaid help in the last 12 months, by age group and sex, Canada, 2012

	Total – 65 years and over		65 to 74 years		75 to 84 years		85 years and over	
	Women	Men	Women	Men	Women	Men	Women	Men
Primary caregiver	percentage							
Total	**100**	**100**	**100**	**100**	**100**	**100**	**100**	**100**
Spouse	19	60*	36	71*	20	63*	F	36[E]*
Son	19	10[E]*	17	7[E]*	20	11*	20	15[E]
Daughter	42	15*	20	F	44	11*	57	33[E]*
Close friend	4	4[E]	6[E]	F	5[E]	F	F	F
Other family member, friend, or acquaintance	16	10[E]*	21[E]	8*	11[E]	12	17[E]	F

[E] use with caution
F too unreliable to be published
* significantly different from women, within age group, at $p < 0.05$
Source: Statistics Canada, General Social Survey on Caregiving and Care Receiving, 2012.

Among senior women aged 65 to 74, the most commonly reported primary caregiver was a spouse, reported by 36% of women in this age category who received care. In the older age categories however, as women become more likely to have lost a spouse or to have a spouse who can no longer provide primary care, the most frequently reported caregiver was a daughter. Daughters were the most commonly reported primary caregivers among both 75- to-84-year-old women (44%) and women aged 85 and over (57%).

In contrast, spouses were the most commonly reported primary caregiver for all age groups of senior men. That said, the proportion of men reporting a spouse as primary caregiver declined across age groups, from 71% at ages 65 to 74 to 36% at ages 85 and over. At the same time, the proportion of senior men reporting other primary caregivers, particularly daughters, increased with age. Among men aged 85 and over who received help, 33%[E] reported a daughter as their primary caregiver.

Seniors helping seniors

In 2012, 17% of women and 16% of men aged 65 and over reported providing help with daily living activities to at least one other senior who had a long-term health condition or physical or mental disability, or who experienced general difficulties due to aging. Among seniors who provided such help, 96% of women and 95% of men indicated that their primary care recipient was a senior.

Twenty-eight percent of senior women and men whose primary care recipient was a senior indicated that this person was their spouse or partner. Another 19% of senior women and men reported primarily helping a parent. Senior women were more likely than senior men to report primarily helping a close friend (25% versus 14%), but less likely to report primarily helping a family member other than a spouse, partner or parent, a friend other than a close friend, or an acquaintance (28% versus 39%).

Seniors helped other seniors with a wide variety of activities. Nearly 9 in 10 senior women (87%) whose primary care recipient was aged 65 and over reported providing help with transportation. The next most frequently reported type of help provided by senior women to other seniors was with scheduling (81%), followed by banking, bill paying, or finances (80%). Many senior women also reported helping another senior with household chores (73%), medical treatments (73%), personal care (71%), and household maintenance and outdoor work (67%).

For the most part, there were no statistically significant differences between senior women and senior men in the types of help they provided. However, senior women were significantly more likely than senior men to report helping with scheduling (81% versus 60%).

Transportation is the most common form of unpaid help received by senior women

The 2012 GSS collected data on the types of unpaid help received by seniors from their primary caregiver. Nearly 8 in 10 women (79%) aged 65 and over reported receiving assistance with transportation from their primary caregiver, making this the most commonly reported type of unpaid help received by senior women (Table 20). Transportation was also the most commonly reported type of help received by senior men, though the proportion (66%) of senior men relative to senior women who received this type of help was smaller. This gender difference was apparent between seniors overall, and within smaller age groupings.

More than half (54%) of senior women who received unpaid help, reported receiving help with household chores, such as meal preparation, cleaning, and laundry. Although a smaller proportion (47%) of senior men overall reported receiving this type of care, the difference was only statistically significant among seniors aged 65 to 74.

Senior men were more likely than senior women to receive help with medical treatments (36% versus 27%). This difference was significant among 65- to-74-year-olds and 75- to-84-year-olds, but not among seniors aged 85 and over.

Table 20
Types of help received among seniors who received unpaid help in the last 12 months, by age group and sex, Canada, 2012

	Total – 65 years and over		65 to 74 years		75 to 84 years		85 years and over	
	Women	Men	Women	Men	Women	Men	Women	Men
Type of help from primary caregiver	percentage							
Transportation	79	66*	73	62*	76	64*	88	78*
Household chores (e.g., meal preparation, cleaning)	54	47*	56	43*	51	49	57	49
House maintenance or outdoor work	40	44	44	38	37	46	42	49
Personal care (e.g., bathing, dressing)	27	24	20	24	27	25	33	22[1]
Medical treatments (e.g., taking medications)	27	36*	19[1]	35*	26	38*	35	32[1]
Scheduling or coordinating care-related tasks (e.g., making appointments)	40	46*	26	41*	37	47	54	54
Banking, bill paying, or managing finances	45	42	31	38	43	44	60	42*
Other	2[1]	F	F	F	F	F	F	F

[1] use with caution
F too unreliable to be published
* significantly different from women, within age group, at $p < 0.05$
Source: Statistics Canada, General Social Survey on Caregiving and Care Receiving, 2012.

Help with household chores is the most common form of paid help received by senior women

In 2012, the most common type of paid help received by senior women was help with household chores. Over half (54%) of women aged 65 and over who received paid help reported receiving help with household chores, such as meal preparation and cleaning (Table 21). The second and third most frequently reported types of help received by senior women were help with medical treatments (47%) and help with personal care activities, such as bathing and dressing (46%).

The top three types of paid help received by senior men differed from those reported by senior women. The type of paid help most frequently reported by senior men was help with medical treatments (53%), followed by help with household chores (34%) and house maintenance or outdoor work (28%).

It should be noted, however, that despite the relative difference in the ranking of different types of paid care, the proportions of senior women and men who received paid help with medical treatments, house maintenance and outdoor work did not differ significantly, either among seniors overall or within smaller age groups. On the other hand, senior women were more likely than senior men to report receiving help with household chores in every age group, except for those aged 85 and over. They were also more likely to report receiving help with personal care in all age groups except for those aged 65-to-74.

Table 21
Types of help received among seniors who received paid care in the last 12 months, by age group and sex, Canada, 2012

	Total – 65 years and over		65 to 74 years		75 to 84 years		85 years and over	
	Women	Men	Women	Men	Women	Men	Women	Men
Type of help from professionals	percentage							
Transportation	24	16*	24	16[E]	24	12[E]*	24	23[E]
Household chores (e.g., meal preparation, cleaning)	54	34*	38	24[E]*	57	30[E]*	64	52
House maintenance or outdoor work	27	28	22[E]	20[E]	30	32[E]	27	34[E]
Personal care (e.g., bathing, dressing)	46	25*	26	17[E]	44	23[E]*	61	39[E]*
Medical treatments (e.g., taking medications)	47	53	55	60	41	46	47	53
Scheduling or coordinating care-related tasks (e.g., making appointments)	9[E]	8[E]	F	13[E]	F	F	13[E]	F
Banking, bill paying, or managing finances	4[E]	5[E]	F	F	F	F	F	F
Other	26	19*	37	21[E]*	23	22[E]	22[E]	12[E]*

[E] use with caution
F too unreliable to be published
* significantly different from women, within age group, at $p < 0.05$
Source: Statistics Canada, General Social Survey on Caregiving and Care Receiving, 2012.

About 5% of senior women have unmet needs for help with daily activities

In 2012, 5% of women aged 65 and over living in private households reported at least one unmet need for help with daily activities (Table 22). This proportion was higher among seniors who had received help in the last 12 months and lower among those who had not (11% versus 3%). However, this could be due to differences in the populations currently receiving versus not receiving help. For example, it could be that those receiving help are already more limited in their daily activities and therefore in need of additional help.

Overall, senior men were less likely to report having unmet needs for help (3%). However, this gender difference was statistically only significant among seniors aged 75 to 84.

Table 22
Seniors with unmet needs for help with daily activities, by age group and sex, Canada, 2012

	Total – 65 years and over		65 to 74 years		75 to 84 years		85 years and over	
	Women	Men	Women	Men	Women	Men	Women	Men
Population	percentage							
Total population with unmet need(s) for help	5	3*	4	3	6	4[E]*	5[E]	4[E]
Seniors who received some help	11	10	12[E]	14[E]	14[E]	9[E]	6[E]	F
Seniors who received no help	3	2*	2	2[E]*[1]	4	3[E]	5[E]	F

[E] use with caution
F too unreliable to be published
* significantly different from women, within age group, at $p < 0.05$
1. Proportion of men and women differed by 0.9% but rounded to the same whole number.
Source: Statistics Canada, General Social Survey on Caregiving and Care Receiving, 2012.

Senior women account for more than 8 in 10 female deaths

Senior deaths account for the majority of deaths occurring in Canada today. Specifically, in 2012, 78.6% of the nearly 246,600 deaths in Canada occurred to people 65 years of age and over. Approximately 101,700 senior women died in 2012, accounting for 83.1% of all female deaths, and 92,100 senior men died, representing 74.1% of all male deaths. The concentration of deaths for women and men from their late seventies to early nineties, may be seen as a "compression of mortality," meaning that many people live a fairly long life and then die within a similar age range.[62]

There were fewer female than male deaths at all ages until age 82 owing to their lower mortality rates compared with males across much of the life course. From age 83 onward, however, more deaths occurred to women than men at each age. Given their lower mortality risks earlier in their life, more females than males survive to the oldest ages. In turn, as there are more women at the oldest ages, more deaths occur to women at these ages than to men.[63] For example, among centenarians, there were close to 2,200 female deaths and over 400 male deaths in 2012, representing 1.8% of all female deaths and 0.4% of all male deaths.

According to the 2009/2011 life table, 92% of female newborns and 87% of male newborns would survive to age 65 if they experienced the age-specific probabilities of dying observed during this period throughout their lives.[64] In comparison, 50 years earlier, the proportions were 81% for females and 69% for males. The likelihood of female

62. For more information on the "compression of mortality", see V. Kannisto. 2000. "Measuring the Compression of Mortality." *Demographic Research* 3 (6). September.
63. Martel, L. 2013. "Mortality, Overview, 2010 and 2011." *Report on the Demographic Situation in Canada*. Statistics Canada Catalogue no. 91-209-X.
64. Ibid.

newborns becoming centenarians has also improved. Based on the mortality patterns during the 2009/2011 period, the chance of a female surviving to age 100 was 5% and that of a male was 2%, compared with less than 0.2% for each sex in 1961.

The upward trend in the number of deaths over many years is primarily due to a population that is both growing and aging. The number of deaths is likely to continue to increase given that Canada is expected to maintain positive population growth. In addition, an aging baby-boomer population will produce a larger senior population which, in turn, is characterized by higher mortality rates.

Cancer and heart disease account for nearly half of deaths to senior women

Although the two leading causes of death in 2012 were the same for senior women and senior men, there were differences in their prevalence, as well as in the order of other leading causes of death (Table 23).

Table 23
Leading causes of death for population aged 65 and over by sex, Canada, 2012

Sex / Leading causes of deaths	Number	Percent	Rate per 100,000 population
Women			
Malignant neoplasms (cancer)	25,460	25.0	892
Diseases of heart (heart disease)	21,080	20.7	738
Cerebrovascular diseases (stroke)	7,072	7.0	248
Chronic lower respiratory diseases	4,970	4.9	174
Alzheimer's disease	4,347	4.3	152
Accidents (unintentional injuries)	3,416	3.4	120
Influenza and pneumonia	2,895	2.8	101
Diabetes mellitus (diabetes)	2,846	2.8	100
Nephritis, nephrotic syndrome and nephrosis (kidney disease)	1,611	1.6	56
Sepsis	1,278	1.3	45
Other causes	26,701	26.3	935
All deaths	**101,676**	**100.0**	**3,561**
Men			
Malignant neoplasms (cancer)	28,925	31.4	1,252
Diseases of heart (heart disease)	20,332	22.1	880
Chronic lower respiratory diseases	5,148	5.6	223
Cerebrovascular diseases (stroke)	4,809	5.2	208
Accidents (unintentional injuries)	2,815	3.1	122
Diabetes mellitus (diabetes)	2,811	3.1	122
Influenza and pneumonia	2,282	2.5	99
Alzheimer's disease	1,875	2.0	81
Nephritis, nephrotic syndrome and nephrosis (kidney disease)	1,469	1.6	64
Parkinson's disease	1,270	1.4	55
Other causes	20,325	22.1	880
All deaths	**92,061**	**100.0**	**3,985**

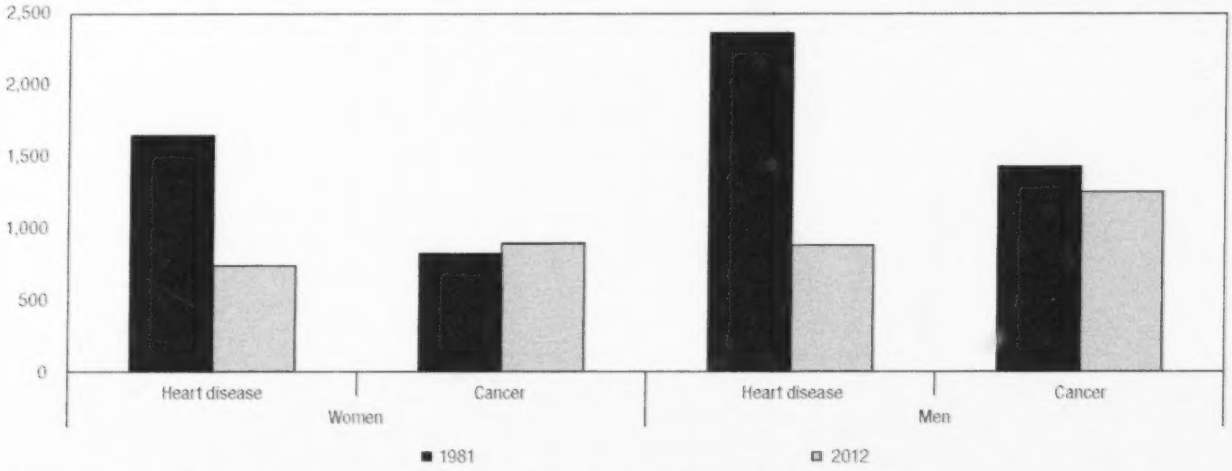
Note: Causes of death are coded to the 10th revision of the World Health Organization's International Statistical Classification of Diseases and Related Health Problems (ICD-10).
Sources: Statistics Canada, Canadian Vital Statistics, Deaths Database, 2012, Survey 3233 and Demography Division, Population Estimates Program.

In 2012, the leading cause of death among both women and men aged 65 and over were malignant neoplasms, or cancer, which was responsible for one-quarter (25.0%) of female deaths and 31.4% of male deaths. The second leading cause of death was heart disease, accounting for 20.7% of deaths to senior women in 2012 and 22.1% of deaths to senior men.

Cerebrovascular disease was the third leading cause of death for senior women (7.0% of deaths) and the fourth leading cause for senior men (5.2% of deaths). Chronic lower respiratory diseases were the fourth most common cause of death among senior women (4.9%). An additional 4.3% of deaths to women aged 65 and over in 2012 were from Alzheimer's disease (fifth leading cause of death), as were 2.0% of deaths to men (eighth leading cause of death).

Age-specific mortality rates take into account changes in the age structure of the population over time. From 1981 to 2012, the mortality rate from heart disease for women aged 65 and over decreased from 1,646 to 738 deaths per 100,000. Over the same period, cancer mortality rates increased from 822 to 892 deaths per 100,000 (Chart 22). Senior men experienced a sharper decline in mortality rates from heart disease than women over time, but unlike women, they also experienced a decline in cancer mortality rates.

Chart 22
Mortality rates for population aged 65 years and over from selected causes by sex, 1981[1] and 2012[2]



1. World Health Organization (WHO). International Statistical Classification of Diseases and Related Health Problems, Ninth Revision (ICD-9).
2. World Health Organization (WHO). International Statistical Classification of Diseases and Related Health Problems, Tenth Revision (ICD-10).
Sources: Statistics Canada, Canadian Vital Statistics, Deaths Database, 1981 and 2012, Survey 3233 and Demography Division, Population Estimates Program.

Cancer mortality rates changed between 1981 and 2012, both by age group and sex (Table 24). In 1981 and 2012, mortality rates from lung cancer were lower for senior women than senior men, in each age group. For women aged 65 to 74, the rates more than doubled between 1981 and 2012 (from 81 to 185 deaths per 100,000), and for women aged 85 and over, they nearly quadrupled (from 69 to 263 deaths per 100,000). Lung cancer mortality rates also increased for men aged 85 and over during this time period, but decreased for men below 85 years of age.

Table 24
Cancer mortality rates for population aged 65 and over, by sex and type of cancer, Canada, 1981[1] and 2012[2]

	65 to 74 years		75 to 84 years		85 years and over	
	1981	2012	1981	2012	1981	2012
Type of cancer	per 100,000 population					
Lung	**214**	**218**	**261**	**359**	**182**	**367**
Women	81	185	83	279	69	263
Men	373	253	527	462	414	582
Breast (women)	**108**	**68**	**143**	**117**	**224**	**217**
Prostate (men)	**94**	**49**	**324**	**204**	**676**	**589**
Colorectal	**81**	**65**	**156**	**145**	**245**	**275**
Women	73	48	138	113	232	243
Men	90	83	181	185	270	340
Other cancers	**425**	**382**	**728**	**803**	**1,053**	**1,434**
Women	349	265	613	533	920	929
Men	516	385	901	795	1,325	1,326

1. World Health Organization (WHO). International Statistical Classification of Diseases and Related Health Problems, Ninth Revision (ICD-9).
2. World Health Organization (WHO). International Statistical Classification of Diseases and Related Health Problems, Tenth Revision (ICD-10).
Sources: Statistics Canada, Canadian Vital Statistics, Deaths Database, 1981 and 2012, Survey 3233 and Demography Division, Population Estimates Program.

In contrast, from 1981 to 2012 mortality rates from breast cancer decreased for senior women across all age groups.